

DOCUMENT RESUME

ED 123 846

EC 090 200

AUTHOR Brodie, Patrick; And Others
TITLE Health Education for Special Children: Intermediate EMR.
INSTITUTION Cortland-Madison Board of Cooperative Educational Services, Homer, N.Y.
SPONS AGENCY New York State Education Dept., Albany. Div. of Drug and Health Education Services.
PUB DATE Jan 76
NOTE 123p.; For related documents, see EC 090 196-205
EDRS PRICE MF-\$0.83 HC-\$6.01 Plus Postage.
DESCRIPTORS Alcoholism; *Curriculum Guides; Dental Health; Drug Abuse; *Educable Mentally Handicapped; Exceptional Child Education; Family (Sociological Unit); *Health Education; Intermediate Grades; Mental Health; Mentally Handicapped; Nutrition; Perception; Prevention; Public Health; Safety Education; *Special Education

ABSTRACT

Intended for teachers and administrators in special education, the curriculum guide offers information on planning a health education program for educable mentally retarded children in intermediate grades. Sections preceding the actual guide include information on specific goals of and elements necessary for a successful health education program, the philosophy and implementation of a school health program, and a curriculum overview. Units are presented in outline form for the following topics: nutrition; sensory perception; dental health; health status and disease prevention and control; drugs, alcohol, and tobacco; mental health; family life; consumer, environmental, and public health; and safety and first aid. Each topical unit consists of five basic parts--overview and objectives (a brief orientation to the philosophy regarding the unit), concepts (necessary background material for behavioral change), content outline, learning and evaluative activities, and resources (including books, films, pamphlets, and games.). (SB)

* Documents acquired by ERIC include many informal unpublished *
* materials not available from other sources. ERIC makes every effort *
* to obtain the best copy available. Nevertheless, items of marginal *
* reproducibility are often encountered and this affects the quality *
* of the microfiche and hardcopy reproductions ERIC makes available *
* via the ERIC Document Reproduction Service (EDRS). EDRS is not *
* responsible for the quality of the original document. Reproductions *
* supplied by EDRS are the best that can be made from the original. *

HEALTH EDUCATION FOR SPECIAL CHILDREN

Curriculum Development Committee

U S DEPARTMENT OF HEALTH
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY.

State Education Department
Division of Drug and Health
Education and Services

Cortland-Madison
Board of Cooperative
Educational Services

Teacher-Writer Team

Primary

Linda Allen
Elaine Faas
Donna Funk
Carole Robinson

Intermediate

Patrick Brodie
Elenna Catalano
Mary Beth Claps
Daniel Funk
Elizabeth Savino
Genevieve Wingate

Secondary

Elvira Brundage
Ann Derr
Elizabeth Hannon
Edward Mueller
Arthur Renschler

Trainer-Writer Team

Janice Allis	David Jacobsen
Anne Brackett	Thomas Murphy
Jeanette Dippo	Nancy Struve

Program Coordinator/Curriculum Editor: Jeanette Dippo
BOCES Health Education Coordinator

Printed by: Graphics Department
Cortland-Madison BOCES

BOARD OF COOPERATIVE EDUCATIONAL SERVICES

McEVOY EDUCATIONAL CENTER
CLINTON AVENUE EXTENSION
CORTLAND, NEW YORK 13045

Dear Special Educators,

A comprehensive health curriculum is a must in the education of exceptional children. Excepting the three "R's", health is probably the most functional of the skills we can attempt to teach special children. Through coordinated efforts, from the primary level to the high school level, proper habits and attitudes can be developed.

When this curriculum guide is implemented, with the vigor characteristic of the Special Educators in our county, there is no doubt that this guide will help provide improved health education in our county and serve as a source of continuous and sequential health education planning. The teachers, however, who employ the guide in their everyday instruction will give the curriculum its ultimate test.

We appreciate the cooperation and coordination that has taken place to make the health curriculum a vital part of the Special Education program in Cortland County. The format in which the curriculum is presented is most useful and provides many ideas to teach content.

It is only through evaluation by those in the field that enables any curriculum to be fully and successfully implemented. Please feel free to contact us if you have any concerns, questions, or suggestions for improvement of the "Health Education for Special Children." This curriculum is a good beginning, but only a beginning to be refined as dictated by the experience of the teachers who utilize it.

Sincerely yours,

George E. Freebern

George E. Freebern, Director
Special Education

Table of Contents

Title Page.....	i
Curriculum Development Committee.....	ii
Superintendent's Message.....	iii
Table of Contents.....	iv
Forward.....	v
Introduction.....	vi
Statement of Philosophy.....	vii
Implementation.....	viii
Curriculum Overview.....	ix
Content Overview.....	xi
Nutrition.....	1
Sensory Perception.....	14
Dental Health.....	22
Health Status and Disease Prevention and Control.....	32
Drugs, Alcohol and Tobacco.....	43
Mental Health.....	60
Family Life.....	76
Consumer, Environmental and Public Health.....	91
Safety and First Aid.....	101

Forward

Health Education For Special Children is the culmination of workshops funded by the Division of Drug and Health Education and Services, State Education Department, and sponsored by the Cortland-Madison BOCES. It reflects the concerted efforts of many persons. The knowledge and expertise of the individual curriculum developers/writers are most worthy of recognition.

This health curriculum guide for special education students is an outgrowth of the health education guides which were developed during the summer of 1974 for use in regular public school classes within this BOCES district.

The eventual mainstreaming of some handicapped children helped to govern much of the material included. Therefore, the activities in each unit were varied enough to provide for individual differences among pupils. The result has been that the content of the units written specifically for emotionally disturbed or learning disabled children, and educable mentally handicapped children was able to follow quite closely the content of the original guides. References should be made to the original guides, therefore, for additional related activities.

To the writing team's knowledge, this is the first comprehensive curriculum created with the special child in mind. It will provide the teacher with many ideas and resources. However, there is always room for modification and suggestions for improvement, any are welcomed.

Introduction

The specific goals of a health education program can be as many and varied as life itself. However, optimal health is dependent upon the interactions of knowledge, attitudes and behavior. The health education program should establish an approach to concepts, generalizations, understandings, facts, values and applications, basic skills, and decision-making processes which can serve as keys to good physical, mental, social, emotional, and spiritual well-being. All participants in the school health education program, including teachers and administrators as well as students, should be assisted in working towards:

1. Acquiring an understanding of his own physical, mental and social health.
2. Developing responsibility toward his own and community health,
3. Acquiring an understanding that the goals of good health result from individual practices and maintenance of those mental, physical, and social habits selected as desirable and good by society and the individual.
4. Acquiring an appreciation of the value of a healthful life.
5. Encouraging systematic development of individual human potential for health, growth and happiness.

These are certain elements necessary for success of a health education program that cannot be written into a curriculum guide. These essential elements come from within the individuals responsible for implementing and carrying out the program:

1. Commitment on the part of administrators and teaching staff to a belief in the value and potential of health education is most important.
2. In view of the definition of health in terms of its psychological, physiological, sociological aspects, there needs to be, more than in any other curriculum area, a willingness to work together and lend support in setting up and maintaining a good school health education program - one which is prevention-oriented and clearly above and beyond the minimal requirements for drug and health education as delineated in the Rules of the Board of Regents and the Regulations of the Commissioner of Education.
3. It is possible to improve the classroom experiences of health education students through sincere desire by all directly involved to utilize to the greatest advantage appropriate resources (including those of a human nature) and/or other quality teaching aids, materials and devices which are made available.
4. Support for the concept of student participation and involvement in their own learning is a most meaningful part of a sound health education program. Provision should be made for a diversity of learning approaches including extension of learning into multi-community settings.

A Statement on Philosophy of the School Health Program

Health is an integral aspect of every phase of life. Without health man cannot function effectively in his society. Health can, therefore, be considered not only biological, but psychological and sociological well-being as well.

The School Health Program, which includes all functions and services designed to promote the optimum health in each child, is a flexible blueprint aimed at assisting students in developing into independent, responsible adults. It would seem that no one, be it student or adult, can be independent and responsible unless he is equipped with the health necessary to be so; health that is, in part, imparted by knowledge and understanding of the forces which is for this reason that, with the guidance of State legislation and the local Board of Education, the School Health Program endeavors to supplement parental responsibility in this realm. The effective and flexible program must originate with the needs and interests of the individual. From this basis, it should continue to meet the needs of the family, community, nation, and the world...

As a result of imparted knowledge, understandings, and good health habits and attitudes, we would hope to kindle, promote, and help each child achieve a state of physical, social, emotional, intellectual and spiritual well-being that would be conducive to such academic learning as the student was capable of acquiring. In short, we aim at helping the student to "become all he is capable of being." This is based on the assumption that health, not being an end in itself, is a means to an end ---- a happy, fruitful life.

Implementation of a School Health Program

Whatever the organizational plan, the only significant test of its worthwhileness is the effect which it brings to bear on the total educational program or the opportunity which it affords children to learn.

When the School Health Program is being established or adjusted, certain guidelines, or basic principles, if adhered to, will help to insure its success. These are as follows."

1. Develop it gradually rather than superimposing it abruptly.
2. Though idealistic in its announced goals, it is realistic in its current performance.
3. It fosters continuous communication between all school staff members.
4. Special facilities are at its disposal.
5. It is interwoven with the instructional program.
6. It brings its services to every student, not just to those in distress.
7. It plays an important role in the school's public relations program.
8. It is constantly engaged in a process of self-examination.
9. It insures a balance in services it offers pupils.

Once the program is ready to be established, there are certain general fundamentals which should be considered in its administration:

1. There should be centralized control to assure efficient and effective functioning of the total program.
2. Adequate budgeting of finances to provide necessary salaries, supplies, and equipment should be carried out.
3. There needs to be proper coordination of various divisions, departments, and areas.
4. Selection of teachers and health specialists should be based on the best qualifications for the particular school and community.
5. Allotment of sufficient time in the school curriculum for the health program to function effectively is a necessity.
6. Definite assignment of duties and responsibilities to teachers, health specialists, and administrative assistants is a must.
7. Organization of a health teaching program should be on a school-wide basis.
8. Consideration of legal provisions, state and local laws, and requirements pertaining to and affecting the School Health Program and pertaining to special children should not be neglected.
9. Provisions should be made for assuring maintenance of the school plant and facilities in a sanitary and hygienic manner.
10. Special measures are necessary to recognize and provide for individual physical, mental, emotional, and social differences of students.
11. Methods and plans for safeguarding the health of teachers, as well as of students, should be an integral part of the plan.
12. There should be constant and thorough evaluation of the total School Health Program.

Curricular Overview

One area of study which is often lacking for special education students is that of health education.

The overall goal of this curriculum is to assist in developing individuals with the competency to function well in society and the ability to cope with the social, physical, emotional, intellectual, and spiritual dimensions of man. This goal seeks to aid in the discovery of self in relation to others in society and in the world and to implement the concept that decision-making is best where each individual has adequate information and experiences upon which to base his decisions. Decision-making is a cumulative process which results from a growing awareness of self and a growing awareness of the healthful alternatives which the health education process provides.

This guide is a vehicle for preventive education, acknowledging that a primary task of the school is development of positive self-concepts, helping students obtain control over their own lives, and maximizing their health potentialities. It offers a curriculum which helps each individual examine the meaning and value he desires health to have in his life and the life style he envisions necessary to implement his desires and values. It represents curriculum designed to fulfill personal needs and interests based on varied ability levels via being meaningful and relevant to students preparing to live healthful, productive and rewarding lives.

This rationale is based on concepts which provide for increasing levels of information and experiences related to physical, psychological, and social development as grade level increases. There is decreasing breadth, but greater concentration of information and experiences in various areas of health education and maturity levels increase providing a continuous and cumulative effect rather than a disjointed one.

Health Education should:

1. Represent a major part of a life-long educational process.
2. Exist for benefit of all students.
3. Represent a process that begins informally during pre-kindergarten years and continues throughout adulthood.
4. Involve total school/community efforts.
5. By its basic nature, revolve around developing a meaningful, satisfying and healthy life.

This particular guide represents one level of a planned, unified and comprehensive K-12 health education program for special children designed to:

1. Meet the needs of all students.
2. Be sequential, building on developmental tasks at each level.
3. Be flexible in order to facilitate implementation on a county-wide basis.
4. Include objectives and learning experiences for assisting in the decision-making process.
5. Be easily updated, due to its format, via replacement of pages upon their obsolescence.

Each topical area or unit consists of five basic parts:

1. Overview and Objectives
2. Concepts
3. Content Outline
4. Learning and Evaluative Activities
5. Resources

The unit overview gives a brief orientation to the philosophy regarding the unit. The outline of objectives reflects the cognitive, affective and psychomotor domains. They signify specific ways students should be able to think, feel, and act, after completion of the unit of study.

The concepts and supporting content outlines provide necessary background material for behavioral change. Coordinated with these are suggested resources and learning and evaluative activities from which student experiences may be selected in order to promote desired behavioral changes. These resources are not only for students, but also include materials which are too difficult for students' personal use, but valuable for teachers in the preparation of lesson plans.

Included among the resources are films which are usually listed with a reference to their Cortland-Madison BOCES number. To locate the producer/distributor, the teacher should consult the NIGEM Index of Films, which is available in most BOCES buildings or other film centers. Of course, any film or material must be previewed and carefully integrated with classroom activities in order to be of maximum effectiveness.

The curriculum guide contained herein is specifically designed to be descriptive and adaptable in order to allow for variations in school systems, teachers, classes and special education students. The teacher may not be able to expect students with certain disabilities to be able to spell correctly or write explanations, if at all, but by repetition as required the student should be able to learn eventually to pronounce and understand the important vocabulary words. The interaction of content and process in health education should lead to the development of problem-solving behavior which can be used flexibly and in a variety of situations. The goal, therefore, is to move as much as possible beyond fragmented and memorized information to the level where concepts are developed and internalized. To this end the teacher may want to draw upon activities from one unit to reinforce the objectives of another, or to use these activities as a point of departure in devising new ones.

Content Overview

Teachers need to be very flexible and ready to adapt the learning experiences to individual learning capabilities. Some of the students who may read and write very poorly can be expected to be very curious and verbalize fairly well regarding health topics presented.

Certain special education students, such as the educable mentally retarded and the trainable mentally retarded, may have very little ability to transfer learning. Words may have to be explained repeatedly in terms they can understand. Any audio-visual materials employed must be carefully screened prior to use and discussed after use to make certain the pupils understand the vocabulary and concepts presented. Emphasis should be placed on learning major concepts not facts that students won't be able to retain. The teaching techniques and extent or depth of coverage of material is governed to a considerable degree by the types and degree of handicaps of the children involved.

Remember that the mentally handicapped child or adult is not very different from any other human being. First, this individual is a human being, and only secondly does he have a handicap. His basic needs are as great as anyone else's, but his difficulties in learning, relating and coping may be greater. His behavioral manifestations may be inappropriate and because of this so-called negative behavior, his problems are great.

Teaching anything to those with learning problems requires special skills and understanding. Their needs are often more individually demanding; and it is usually more difficult to communicate with them. In preparing this guide, the writers were especially conscious of the tremendous range of special education students' abilities to learn. There are handicapped individuals who are barely distinguishable from the so-called "normal" members of society. And there are those whose handicaps are so extreme that they may never learn to perform simple tasks of self-care such as eating or dressing. The writers of this guide assume that the special education teachers using it already have an understanding of the similarities and differences of their students compared to those students without learning problems. Therefore, any reference to types and/or classifications of handicaps is generally avoided.

NUTRITION

OVERVIEW

Americans have provided themselves an excess of food. So much is available that obesity is a major concern and foods and beverages are advertised on the basis of low-calorie content. As a nation we eat well, but maintaining adequate nutrition is a major health problem because as individuals we do not!

Without a definite program of nutrition education started at the beginning of their school life, children are apt to confine their food choices to favorite foods. Likewise, children cannot project benefits into the future and so have little concern or appreciation for what the future will bring if they fail to eat properly now. Nutrition education should be stressed to boys as well as girls. The changing status of the family with working mothers and parental sharing of household responsibilities indicates a necessity for everyone who has influence on children's eating habits to be aware of the implications of good eating patterns. The emphasis and practice of eating and choosing the right foods must be learned. Dietary fads and reducing fads thrive upon inadequate public knowledge and faulty practices.

The school's major nutritional concern is in the promotion of sound dietary habits through stimulating nutritionally-grounded experiences.

OBJECTIVES

1. Differentiate among varieties, forms and sources of food.
2. Compare the relationship between the foods eaten and the body's health.
3. Distinguish between those factors which encourage and discourage individuals from eating certain foods.
4. Analyze the relationships between general physical development and the basic principles of adequate food selection.
5. Develop acceptable criteria in the selection of foods.
6. Cite examples of social and emotional influences on nutritional behavior.
7. Analyze some of the consequences of poor food selection and eating patterns.
8. Apply knowledge of proper nutrition when selecting one's food.

9. Analyze current trends and events in society which affect nutritional status and behavior.
10. Describe various ways in which the nutritional value of foods can be preserved.
11. Demonstrate a knowledge of foods belonging to the basic four food groups.

MAJOR CONCEPTS

1. Growing regularly is a sign of health.
2. All living things need food in order to grow.
3. Optimal growth is dependent on personal health practices and wise decisions.
4. Work efficiency depends upon adequate food intake.
5. Our selection of food depends upon many different factors.
6. All nutrients needed for growth are available through foods.
7. Some foods do more for us than others.
8. One's daily diet should be planned each day to include foods which produce sufficient amounts of nutrients and calories.
9. Observing proper table manners helps make meals pleasant for everyone.
10. One's feelings and emotions affect digestion of food.
11. Certain processes make modern-day eating a safe, varied and interesting part of living.

CONTENT OUTLINE

- I. Functions of Foods in the Body
 - A. Building body tissues and muscles
 - B. Preventing disease
 - C. Building strong teeth and bones
 - D. Providing energy and heat
 - E. Aiding in elimination
- II. Nutrients and Their Functions
 - A. Proteins
 1. Build and repair body tissues
 2. Supply heat and energy
 - B. Carbohydrates
 1. Supply heat
 2. Provide energy
 - C. Fats
 1. Supply heat
 2. Provide energy
 - D. Vitamins
 1. Regulate body processes
 2. Maintain health (prevent deficiency diseases)
 - E. Minerals
 1. Build and repair body tissues
 2. Regulate body processes
 - F. Water
 1. Regulate body processes
 2. Build body tissue
- III. Sources of Nutrients
 - A. Protein
 1. Milk
 2. Meat group
 - B. Carbohydrates
 1. Breads and cereals
 2. Vegetables and fruits
 3. Sweets
 - C. Fats
 1. Butter and margarine
 2. Oils
 - D. Vitamins and minerals
 1. In all food groups
 2. In varying amounts
- IV. Planning for Good Nutrition
 - A. Selecting from the Basic Four food groups for simple meal planning
 - B. Good snacks versus empty calories
- V. Proper Care of Foods (keeping food and water clean and free from harmful "germs")
 - A. Processing to prevent spoiling
 1. Canning
 2. Drying

3. Preserving
4. Freezing
5. Refrigeration
- B. Desirable practices in preparing, serving and storing foods

VI. Reasons for Eating

- A. Maintain life
- B. Promote growth
- C. Keep healthy
- D. Satisfy hunger
- E. Satisfy habit
- F. Enjoyment

VII. Digestion

- A. Basic structure of digestive tract
 1. Mouth
 2. Stomach
 3. Small and large intestines
- B. Function of the structures

VIII. Influence of Environment and Custom on What We Eat

LEARNING AND EVALUATIVE ACTIVITIES

1. Observe growth of seeds and plants in soil; use soil with insufficient nutrients, adequate nutrients and too many nutrients.
2. Place grass seed in a sponge and add water; discuss the results with the class.
3. Make a trip to the farm, pet store or zoo; ask farmer, store or zoo manager about foods the animals eat.
4. Discuss the growth of new cells. Observe how a cut or injury heals.
5. Look at onion cells under a microscope. Relate to our body cells. Use charts to show how cells divide.
6. Keep height and weight charts for individual comparison at 3 month intervals.
7. Bring in clothes from last year to try on.
8. Keep charts of self-testing physical activities (jumping, throwing, etc.) to measure individual progress.
9. Dramatize good posture.
10. Make cut-out figures to show good and poor posture.
11. Observe eating habits of pets; note differences between large and small animals, if any.
12. Compare your food intake with infant or toddler brother or sister.
13. Discuss: Bears need to eat when they hibernate; we work better if we eat breakfast; babies are less chubby after they learn to crawl and walk; we are not hungry when we are sick; we are very hungry when we get well.
14. Discuss lunches or lunch menus:
 - What foods did they eat today that the cow gave?
 - Did they have any foods that grew underground?
 - Did they have any foods that grew on a tree, on a vine?
 - Did they contain foods from the basic Four Food groups?
15. Visit a fruit and vegetable stand, meat market, bakery, or dairy store. Follow-up the visit with some of the following evaluative experiences:
 - Make a chart depicting the vegetables that: grow above the ground; grow below the ground; that have leaves; are red, yellow, white, etc.
 - Develop a bulletin board of fruits that grow on bushes, vines, trees.
 - Visit the lunchroom to ask about the different types of bread that are baked for school lunches: corn bread, muffins, baking powder biscuits, yeast rolls, sweet rolls, etc.

Make a chart depicting foods which come from animal and poultry sources.

Make a chart of fruits and vegetables available in your community.

Check those you have learned to eat this year.

16. Have a play store using stand-up pictures for stock with empty cans and boxes. Shop for foods.
17. Make a "good foods" booklet. Show a variety of foods from the basic four food groups.
18. Make a food chart showing balanced meals from the basic four groups.
19. Make simple food mobiles from construction paper.
20. Collect samples of cereal grains in plastic bags to display on bulletin board.
21. Discuss: Foods good for snacks.
22. Display pictures of the "pleasure foods" and tell when they should be eaten.
23. Show that some foods have more of one nutrient than other foods. Discuss why it is important for us to eat many types of foods.
24. Discuss the place of candy and sweet foods in the diet.
25. Visit a dairy to see how milk is pasteurized.
26. Write and illustrate poems or riddles about non-nutritional foods.
27. Discuss traditional holiday foods (at home and in other countries). Make cranberry sauce for Thanksgiving, chocolate Easter eggs, etc.
28. Make butter, bread, jello, applesauce in the classroom.
29. Serve a good breakfast in the classroom.
30. Make your own placemats for breakfast in art class.
31. Give each child a paper plate and a magazine. Cut out pictures for a good lunch, breakfast or dinner, paste on plate, add placemat, plastic silver and beverage for an attractive poster.
32. Discuss the nutritional value of raw and cooked vegetables. Why do we cook foods? Cook foods varying lengths of time and observe both the food and the water each time.
33. Collect food labels; discuss what the label tells about food that is inside the container. (Weight, additives, artificial coloring.)

34. Visit the following and study the role each has to play in providing safe food to eat:
 - Meat packing company
 - Water treatment plant
 - Canning factory
 - Bakery
35. List and discuss the foods they ate for breakfast this morning.
36. Role play ways to encourage a relaxed mealtime and ways to create tension during mealtime.
37. Discuss food intake of people involved in different occupations.
38. Discuss radio and television advertisements and family food likes.
39. List foods we have learned to eat which came to us from other countries.
40. List foods you dislike and find substitute foods supplying same nutritional value.
41. Visit the school kitchen to find out how they store foods to conserve nutritional value. (Refrigeration, freezer, cold, dry, etc.)
42. Discuss food fads and the problem of getting reliable information. Discuss how to tell the difference between food facts and misinformation.
43. List superstitions the pupils or their parents have about foods. Discuss where they think these ideas came from and whether they are based on sound facts. (Fish is a brain food, white eggs are better than brown, etc.)
44. Relate obesity to caloric intake and output. Determine how our body uses energy.
45. Discuss table manners and reasons why manners are used.
46. What are the effects of cheerful, pleasant surroundings?
47. Discuss whether feelings of happiness or sadness influence digestion.
48. Discuss rest and relaxation in relation to digestion. Importance of moderate activities immediately after meals.
49. Discuss effects of a quick or hurried meal.
50. Discuss the advantages of each of the processes used to preserve food. (Cooling, canning, drying, dehydration, freezing, smoking, salting, pickling, freeze-dried, flash frozen.)
51. Expose a variety of foods to the air at room temperature. Note how long it takes for each kind of food to spoil. Discuss how these foods are "kept" when they are transported and when they are in stores. Identify the signs of food spoilage: odor, change in texture, change in appearance and color, and change in taste.

52. Observe under a microscope the growth of bacteria or mold that appears on spoiled food.
53. Invite a home economist to speak to the class about preserving and enriching food.
54. Make a bulletin board display of reasons why we eat (growth, energy, feel better, etc.).
55. Relate number of accidents, errors, misjudgments, to food intake.
56. Have a committee check plate waste for a week to determine what foods are not eaten in the lunchroom from both school served and home packed lunches. Discuss why these foods were not eaten; discuss how to learn to like foods.
57. Write about your favorite food. (Try to make it sound so tasty others will want to try it. Bring recipe to class for others to try. Tell its history and any related customs.)
58. Plan a Spanish menu, Italian menu, French menu, etc.
59. Make a chart of the nutrients listing each one, telling what it does and what foods contain adequate amounts of them.
60. Discuss best ways of spending allowance money on food treats. Emphasize best time to eat snacks.
61. Choose a food such as milk or eggs or a favorite vegetable. Make a little book chart showing the many ways to serve this food, how the food aids in growth and development, etc.
62. Plan a "Food of the Week" campaign to introduce new foods or those seldom eaten.
63. Develop a class or individual recipe booklet to add to from time to time. Use recipes they've tried from their own camping or cooking experience or refer to Scout or Junior Cook Books.
64. Prepare sample breakfast, dinner, snack, and party menus. Compare with own daily intake.
65. Prepare charts or posters showing an infant, growing child, construction worker, a mother, a grandmother, etc. Discuss their individual food needs.
66. Demonstrate setting up a table, serving and clearing off.
67. Discuss and demonstrate use of napkins, utensils, condiments, etc.
68. Soak some dried food such as prunes, raisins, macaroni, milk and soup in water. Observe the effect on the food; permit the soaked food to remain exposed to the air at room temperature for several days. Discuss why this soaked food spoiled, but when it was dried it did not.

69. Have students plan a Sunday dinner meal, Thanksgiving dinner (or other) using local newspaper food ads as references.

RESOURCES

Books:

Food and Nutrition, W. H. Sebrill and J. J. Haggerty, The Life Science Library; Time, Inc. 613.2

S

The Medicine Show, 1963, Consumer Union, Part II (Chapters 13-17) (Food Fadism and Nutritional Quackery), available through SEIMC

Food as a Crutch, J. Gilbert Wrenn; American Guidance Service, Inc., Publishers Building, Circle Pines, Minnesota 55014

The Nuts Among the Berries, Ballantine Books, Inc. (Food Fadism and Nutritional Quackery), available through SEIMC

Sleep, Exercise and Nutrition, Scott, Foresman and Company, Glenview, Illinois, 60025

Films:

Bread, BOCES (video cassette), 11 minutes

Chocolate: Why is Chocolate Sweet?, BOCES (video cassette), 4 minutes

Count Down 4-4-3-2..., BOCES #833-115, 30 minutes

Digestion in Our Bodies, BOCES #831-47, 11 minutes

*The Flim-Flam Man, BOCES #833-118, 30 minutes

Food: Story of a Peanut Butter Sandwich, BOCES #832-118, 15 minutes

*Getting It All Together, BOCES #833-120, 30 minutes

*The Great Nutrition Turn On..., BOCES #833-122, 30 minutes

How a Hamburger Turns Into You, BOCES #832-119, 19 minutes

*Look Inside Yourself, BOCES #833-131, 30 minutes

Milk: From Farm to You, BOCES (video cassette), 13 minutes

Onions and Spaghetti: Why Do Onions Make Me Cry?; BOCES (video cassette),

Oranges: Where Do They Come From?, BOCES (video cassette), 4 minutes

*The Racer That Lost His Edge, BOCES #833-135, 30 minutes

What's Good To Eat, BOCES #832-199, 17 minutes

Films (Cont.):

- * films from Mulligan Stew Series - student comic book-type manuals, BOCES #P-132, records, and teacher's manuals available upon request.

Pamphlet:

Hey Kids! Get Aboard the Good Ship Vitamin C, Florida Citrus Commission, Institutional and School Marketing Department, P.O. Box 148, Lakeland, Florida 33802. Also spirit duplicator masters of The Orange Clock, Monthly Calendar, Word Picture Story, and Four Seasons

Filmstrip & Cassette:

The Healthy Way in Wonderland - "Chef Ahmalett's Health Diet," BOCES #392-22.

Kits:

Cereals, A Food For Today, BOCES #123-24

It's Breakfast Time, BOCES #123-23

Story of a Loaf of Bread, teaching unit for primary grades, Continental Baking Company, Home Economics Department, P.O. Box 731, Rye, N. Y. 10580

Yardsticks For Nutrition, BOCES #123-28

Game:

The 4 Food Groups for Better Meals Game, Food and Nutrition Service, U.S. Department of Agriculture, BOCES #110-35

Puzzle:

Floor Puzzle: Breakfast, 36" x 24", sturdy puzzle, Trend Enterprises, Box 3073, St. Paul, Minnesota 55165, \$10.20

Posters:

American Institute of Baking, 400 East Ontario Street, Chicago, Illinois
Foodway to Follow
The Pack-It Meal

Dairy Council of California, 1095 Market Street, San Francisco, California
Child Feeding Posters
The Four Food Groups
My Lunch for a Happy School Day
We All Like Milk
What We Do Day By Day

Health Education Notebook, Nutrition Materials, BOCES #HN-19 includes:

"The Good Foods Coloring Book", U.S. Department of Agriculture
"Foods Facts and Fun", Black Light, Inc.
"Where We Get Our Food", National Dairy Council
Poster - The Big Four Daily Countdown, Del Monte Corp.
"Versatile Vegetable I through VI, Green Giant Corp.
"Eat the 1-2-3-4 Way", National Dairy Council
"Food Makes a Difference", N.Y.S. College of Human Ecology at Cornell
"Milk and You", local dairy farmers

SENSORY PERCEPTION

OVERVIEW

- The senses keep us in touch with the world and tell us of our body's needs. Individuals need to be aware of the work and function of the five main senses -- and some additional senses. Likewise, the senses are related to that larger system of which they are a part -- the nervous system.

There are warning signs that tell us when the eyes and ears are not functioning properly and there are specific measures to be followed in caring for these sense organs. As the child reaches the ages of nine, ten and eleven, it is essential for him to have all his senses functioning optimally if they have not been before. At this age his academic accomplishment takes on new meaning, because as he assesses himself in comparison with others, the child develops a positive or negative reaction, the basis for a self image which will follow him to adulthood. For the child with an educational handicap, there will have been many negative experiences in the past, so the ability to use his senses as efficiently as possible in school is particularly important.

He is also becoming old enough to learn how to care for his sense organs himself. He can learn the rules for avoiding injury and infection, and the importance of regular checkups. He may now be able to care for any sensory aids he must use. Can he keep his glasses clean and free from scratches? Can he replace run down batteries in his hearing aid? The responsibility will surely increase his appreciation of all he then sees or hears.

OBJECTIVES

1. Identify the sense organs.
2. Value the importance of proper care of the sense organs.
3. Analyze the general structure and function of the sense organs.
4. Cooperate in vision and hearing tests.
5. Explain the need to correct or compensate for vision and hearing deficiencies.
6. Utilize prescribed sensory aids properly.
7. Show consideration of others who wear special aids or glasses.
8. Identify rules for protecting the sense organs from injury and infection.

MAJOR CONCEPTS

1. There are five main or special senses - seeing, hearing, smelling, touching, and tasting.
2. Most of our learning about the world around us is gained through our eyes and ears.
3. An understanding of the structure and function of the sense organs develops an awareness of their importance to the individual.
4. Ignorance of proper functioning of the senses may be detrimental to the well-being of the individual.
5. Qualified medical and para-medical personnel should be consulted for any sensory problem.
6. The eyes receive light and send light messages to the brain; then we see.
7. Sound is produced by something vibrating.
8. Eyeglasses can help correct near-sightedness, far-sightedness, and astigmatism.
9. Hearing aids can help people with certain kinds of hearing loss to hear better.
10. Taste and smell often "go together" and are frequently called the "chemical senses."
11. The sense of touch is actually a group of senses that perceive heat, cold, pressure, pain, and so on.
12. People who are color-blind cannot distinguish certain colors.
13. Since the sense organs act as receiving stations for impressions of the world around us, we should care for them well.
14. The body works as a unit. All parts are interrelated.

CONTENT OUTLINE

I. The Senses and Their Interrelationships

II. Special Senses

A. Vision (sense of sight)

1. Parts of the eye
2. How we see
3. Common vision problems
 - a. Near-sightedness (myopia)
 - b. Far-sightedness (hyperopia)
 - c. Astigmatism
 - d. Strabismus
 - e. Amblyopia
 - f. Conjunctivitis
4. Color perception
5. Visual acuity tests
6. Care of the eyes and vision
 - a. Eye disorders
 - b. First-aid for eye injuries
 - c. Eye care and general health

B. Hearing (sense of sound)

1. Parts of the ear
2. How we hear
3. How the ear helps maintain balance
4. Common hearing defects
5. Tests of hearing
6. Care of the ears and hearing

C. The sense of taste and smell

1. Taste buds in the tongue
2. How we taste substances
3. Cells of smelling sensations in the nose
4. How we smell substances
5. Care of the organs of taste and smell

D. Skin sensations

1. Pressure, touch and pain
2. Heat and cold
3. How the skin sensations help us

III. Sensory Perceptions and Good General Health

- A. Sleep and rest
- B. Nourishing foods
- C. Exercise
- D. Protection of our senses
- E. Medical check-ups

LEARNING AND EVALUATIVE ACTIVITIES

1. Make a bulletin board on the five senses. Teacher provides name and picture of part of body (eye, ear, nose, etc.). Child provides pictures of something to see, hear, etc.
2. Play game "Sharp Eyes": Have children make a circle standing close to each other, with hands behind their backs. One child is in the center of the circle; he is the dog. Some child has the dog's bone (any object) and he passes it quickly to child next to him. Keep passing the bone on. At some time, the bone may be passed the opposite way. Those in circle may only make motion of receiving bone to further confuse dog. Dog must have sharp eyes to find who has the bone. When he thinks he knows he may have 2 guesses. If he guesses right, he may still be the dog - otherwise child with bone becomes the dog.
3. Play game "Who Called?": Children form a circle and one child stands with his back to circle about 15-20 feet away. One child in center of circle points to another child to call the name of the child who is away. As soon as child recognizes caller, he says, "It is ____." He has 3 chances. If he fails, he changes place with caller. If he is correct, he changes places with person in the center.
4. Discuss day and night visions. Send one child into dark closet for a few minutes and upon return let other children look into his eyes to see dilation of pupils.
5. Play "What Can You See in 1 Minute".
6. Illustrate sound waves by plucking a tightly stretched wire or striking a tightly stretched membrane (drum) to vibrate it. Listen to a watch tick. (Different types of sounds.) Put a rubber band around a box and pull it to show how sound waves start.
7. Collage of pictures depicting the five senses.
8. Have children tape-record their voices.
9. Explore poems depicting body senses.
10. Write poems about the body senses.
11. Blindfold a student and have him identify various sounds, i.e. whistle, knock on the door.
12. Discuss eye and ear defects which interfere with normal hearing and vision. Also discuss how these defects can be compensated for or corrected.
13. Collect an assortment of things such as an eraser, a bracelet, a pen, a bobby pin, a key, a paper handkerchief. Volunteers may be blindfolded and the objects handed to them, one by one, to identify. This experiment will show how many things can be identified by touch alone.

14. Darken the classroom and note the change in color of various objects.
15. Demonstrate how sound travels by securing a tuning fork. Strike it gently and quickly place it in a pan of water so that the ends touch the water. It will make a humming sound because the prongs vibrate. The water will move with the vibration.
16. Blindfold a student, have him hold his nose and then try to differentiate between a potato and an apple.
17. Put the names of several occupations in a box. Have the children pick out one of these and relate the importance of the different senses to the occupation, i.e. pilot, telephone wirer, signalman, coffee taster.
18. Make a comparison of the sense involved in radio and television.
19. Have the children discuss how color is used for safety.
20. Have the students discuss situations in which their ears hurt or "pop" when swimming or riding in a car.
21. Invite the school nurse to discuss the body senses and explain instruments used in the school to test hearing and vision.
22. Blindfold a student and have him hold his nose and then try to identify various foods and substances.
23. Assemble a class library of books about people who have overcome sensory handicaps.
24. Go for a "listening walk." Talk about the sounds you hear.
25. Make a tape of familiar sounds such as thunder, birds, footsteps, running water, and a train going past. Ask the children to identify the sounds. Older students may wish to borrow the recorder and tape sounds themselves.
26. Read a story and ask the children questions, either as you go along, or at the end. If they know you are going to do this, they will try harder to listen carefully.
27. Make a "grab bag" out of a draw-string bag. Fill it with common objects and open the top just enough for the child to put his hand in. Ask him to choose an object and identify it by touch, without peeking.
28. Finger painting is fun if you close your eyes and draw a picture. Then open them and see how well you did without looking.
29. Little samples of different textures such as corduroy, satin, sandpaper and feathers are interesting stapled onto the pages of an album. Talk about what you think of or how you feel when you touch the different samples.

30. Shapes such as triangle, circle and square have a whole new meaning when explored by touch. Have a variety of large and small, and rough and smooth for sorting or matching while blindfolded.
31. Put a number of common objects on a tray. Have the children look at them carefully for a minute or two. Then cover them. Can the children name all the objects they saw?
32. Look at a picture or a painting for two or three minutes with the whole class. Then remove it and ask the children to draw with crayons what they saw. Ask them to make their drawings as much like they just saw as they possibly can. Then check for accuracy of detail.

RESOURCES

Books:

About Four Seasons and Five Senses, Shaw Radlauer; Melmont Publishers, Inc., Chicago, Illinois, 1960, 811

R

Find Out By Touching, Paul Showers; Thomas Y. Crowell Company, New York, 1961, 152

S

How We Talk; The Story of Speech, Marilyn Brottman Bennett and Sylvia Sanders; Medical Books for Young Children; Lerner Publications Company, Minneapolis, Minnesota, 1966, 612

B

The Listening Walk, Paul Showers; Thomas Y. Crowell Company, New York, 1961, 152

S

My Five Senses, Alike; Thomas Y. Crowell Company, New York, 1962, 612

A

The True Book of Sounds We Hear, Illa Podendorf; Children's Press, Chicago, Illinois, 1955, 534

P

What is Sound, Gabriel H. Reuben, 534

R

We Read About Sounds and How They Are Made, Harold E. Tannenbaum, 534

T

Films:

A Look at You, BOCES #831-244, 13 minutes

Eye Care Fantasy, BOCES (video cassette), 8 minutes

Hailstones and Halibut Bones I, BOCES #831-327, 6 minutes

Hailstones and Halibut Bones II, BOCES #831-328, 7 minutes

Inside/Out Series: BOCES (video cassettes), 15 minutes each

A Sense of Joy
Donna

Kevin, BOCES #842-9, 16 minutes

Listening, BOCES #832-97, 14 minutes

Films (Cont.)

Philip and the White Colt, BOCES #833-134, 23 minutes

Thousand Eyes, A, BOCES #831-315, 10 minutes

Ways to Find Out, BOCES #831-310, 11 minutes

Kit:

Practicing Good Health, BOCES #123-29

"You - and Your Ears"

"You - and Your Eyes"

"You - and Your Five Senses"

"You - and Your Sense of Smell and Taste"

"You - and Your Sense of Touch"

HEN:

Sensory Perception Materials, BOCES #HN-21

DENTAL HEALTH

OVERVIEW

Are good teeth really important to appearance and health? Watch people when they smile. . . or look into the mirror. The lack of understanding and appreciation for good dental health on the part of the parents and children often results in the neglect of early and regular dental care. Many other factors, among them frequent and excessive consumption of sweets, failure to practice good oral hygiene habits, fear of dental treatment and failure to include funds for dental care in the family budget have all contributed to one of the most common of all diseases affecting the American people -- dental caries (tooth decay).

This is undoubtedly even more true for handicapped children than for the general public. A handicapped child is less able to influence practices in the home. If he comes from a family which does not buy toothbrushes for the children, or does not take him to the dentist or limit the consumption of sweet foods, he is not apt to try to convince his parents to change. This may be due to a child's lack of confidence, inability to see the cause-effect relationship between dental care and dental health, or fear of dental treatment.

The result may be even more unfortunate than it would be for a normal child. If there are speech defects for which correction of dental defects could facilitate improvement; if the child has broken or decayed teeth having a negative effect on his social interaction; if he has discomfort from the poor state of his teeth, the child cannot take full advantage of special educational services or any other opportunities for growth.

Dental health has a direct bearing on general health and deserves the attention of teachers and students at every level.

OBJECTIVES

Suggested Pupil Outcomes:

1. Develop favorable attitudes toward caring for the mouth and teeth reflected in habitually practicing good dental hygiene.
2. Describe how dental health is a necessary requirement for a good appearance.
3. Encourage parents to provide periodic professional treatment.

4. Distinguish between practices which promote and those which hinder development and health of oral structures.
5. Utilize sound protective measures against accidents to oral structures.
6. Value the continuous need to improve dental health status.
7. Describe the functional characteristics of the oral structure.
8. Value the role of proper diet in the development and maintenance of dental health.

MAJOR CONCEPTS

1. The number of teeth we have changes as we grow.
2. Daily care is important to dental health.
3. Teeth have structures to serve specific purposes.
4. The teeth are calcified structures fixed in bony sockets in the upper and lower jaws.
5. Food habits influence dental health.
6. Caries usually begin with a small hole, usually in a fissure or flaw of a tooth, in an area where food may be lodged, or where it is difficult to remove food by brushing.
7. Preventive measures for periodontal diseases include proper tooth care, a well-balanced diet, and regular visits to the dentist.
8. Traumatic injury can crack, loosen, or knock out teeth possibly causing malocclusion and affecting speech patterns.
9. Safe play habits must be developed to avoid tooth injury.
10. Daily personal care promotes dental health.
11. Dental supervision is important in controlling dental disorders.
12. Our teeth should be a permanent part of our bodies.

CONTENT OUTLINE

- I. How a Tooth Grows and Develops
 - A. A look at the structure of a tooth
 1. Root
 2. Crown
 3. Neck
 - B. Let's analyze the composition of a tooth
 1. Enamel
 2. Cementum
 3. Dentin
 4. Pulp
 5. Periodontal membrane
 - C. Let's look at the kinds of teeth and their jobs
 1. Types
 - a. Central incisors
 - b. Lateral incisors
 - c. Cuspids
 - d. Bicuspid
 - e. Molars
 2. Functions
- II. Nutrition's Important Role in Dental Health
 - A. Foods necessary for maintaining oral health
 - B. Vitamins and minerals needed for good dental health
 - C. Certain kinds of foods that are detrimental to good dental health
- III. Problems Do Arise!
 - A. Malocclusion
 1. Definition - What it is
 2. Causes - What its causes are
 3. Treatment - How it can be treated
 4. Prevention - What you can do to prevent it
 - B. Dental caries
 1. Definition - What they are
 2. Causes - How they develop
 3. Treatment - What can be done to correct them
 4. Prevention - How they can be prevented
 - C. Treatment and prevention of some common periodontal diseases
 1. Gingivitis
 2. Vincent's infection - Trench mouth
 3. Periodontitis
 - D. Traumatic injury
 1. Common causes
 2. How various injuries are corrected/treated

IV. Maintaining Oral Hygiene

- A. Proper brushing
- B. Massaging
- C. Rinsing the mouth
- D. Use of dental tape or floss
- E. Prevention of injuries to the teeth
- F. Good dental health habits
- G. Fluoridation
- H. Good nutritional habits

V. Roles of dentists

- A. Prevention of dental problems
- B. Correction of dental problems
- C. Special types of dentists
 - 1. Orthodontist
 - 2. Pedodontist - children's dentist

LEARNING AND EVALUATIVE ACTIVITIES

1. Compare the teeth with other cutting and grinding machines.
2. Make a table display called "using the right tools", have some things for which children should not use their teeth (bottle caps, nut, etc.). Beside each one place a tool or picture of a tool that should be used.
3. Demonstrate flossing. Have a child hold up a forefinger and middle finger firmly together. Gently move a strand of dental floss (wound around your forefingers) between the upright fingers. Fold the dental floss around one finger moving upward to remove food plaque. Move the floss down again and up around the other finger.
4. Distribute toothbrushes and small tubes of toothpaste for all children to take home and use. (Often available free from major manufacturers.)
5. Make toothpowder in class. Students mix the following ingredients in the proportions indicated: 1 teaspoon salt, 2-3 teaspoons baking soda, and a drop or two of oil of peppermint, wintergreen or cinnamon. Have pupils take some home to use when brushing teeth.
6. Discuss and diagram a tooth, showing and labeling each part and naming its function.
7. Discuss the importance of taking good care of primary teeth even though you will be losing them.
8. Discuss the types of teeth various animals have and relate the kind of teeth they have to the kind of food they eat.
9. Show how teeth aid in digestion by experimenting with sugar and water. Put a whole lump of sugar in one glass of water and a crushed lump in another glass. Stir each and observe which dissolves more quickly; cut or crushed food can be changed more easily into liquid form so that our bodies can digest it.
10. Chew a piece of bread until it begins to taste sweet; discuss in relation to chewing and digestion.
11. Use "tes-tape" (available at drug stores) in saliva following the eating of certain foods to show presence of sugar in food.
12. Estimate the cost of the "sweet tooth" habit, and compare it with the estimated cost of more wholesome food.
13. Cut marshmallows and apples with knife to demonstrate differences as to how food sticks.

14. To show that acid will weaken substances containing calcium (such as tooth enamel) place a whole egg in a bowl of vinegar (acetic acid) for about 24 hours. The egg shell should become soft as the vinegar decalcifies the shell.
15. Determine how many class members have had accidents injuring teeth. Discuss how they might have been prevented.
16. List activities which might damage enamel (biting hard objects, opening bobby pins, cracking nuts, chewing pencils, chewing ice, chewing hard candy, pumping drinking fountain, falling off bicycles or skates, etc.).
17. Discuss malformation of teeth and how teeth depend on each other for alignment.
18. Discuss the decay process through posters on bulletin boards.
19. Draw pictures of healthy and unhealthy teeth and discuss mouth and tooth diseases.
20. Make paraffin models. Bite on paraffin which has been slightly warmed. Fill paraffin model with plaster of paris. Illustrate occlusion.
21. Demonstrate proper ways to brush teeth and discuss time for brushing them.
22. Perform (either at school or at home) disclosing tablet test to demonstrate effectiveness of toothbrushing. (Your dentist or local dental society can provide information about securing a supply of these tablets.)
23. Discuss the value of the use of toothpastes or toothpowders.
24. Bring in toothpaste advertising. Compare and evaluate.
25. Observe one's own teeth in a mirror to determine how clean they are. Observe any debris by removing some with toothpick and observing under microscope.
26. Demonstrate relative value of brushing, swishing or chewing raw vegetables. Six students eat chocolate cookies; then have one brush with water, one swish and swallow, one eat apple, one eat carrot, and one eat celery and one does nothing. Compare residue left on teeth.
27. Conduct a smile campaign with emphasis on mouth cleanliness.
28. Write group letter to state health department requesting information about fluorides.

29. Invite dentist to tell how he can repair broken teeth, or send small group to dentist to prepare report for class on how he makes repairs and cost.
30. Discuss reasons for regular visits to dentist.
31. Discuss how to make dental appointments, why it is important to be prompt, and how to remember appointments.
32. Survey lunchroom menus for a week. Record foods containing nutrients for dental health and foods that are nature's "toothbrushes".
33. Make posters illustrating how teeth affect appearance.
34. Diagram and discuss teeth showing progress of decay.
35. Write a brief paragraph in answer to question: "What must we do to take care of our teeth?"
36. Write safety jingles, limericks, slogans relating to the care and protection of the teeth.
37. Investigate reasons for and results of orthodontic treatment.
38. Using a 3 minute egg timer, a plastic model of teeth or a plaster of paris model supplied by a dentist, demonstrate the correct method of brushing the teeth.
39. Have students make tooth impressions in an apple. Place apples at random on a tray. Ask each student to identify his own apple.

RESOURCES

Books:

Dentist's Tools, Carolyn Lapp; Lerner Publications Company,
Minneapolis, Minnesota, 1961, 617.6

Health and Growth Series, Grades 1-8, Scott, Foresman and
Company, Glenview, Illinois 60025

Films:

Dentist in the Classroom, BOCES #832-73, 15 minutes

Project Teeth, BOCES #832-72, 14 minutes

Tommy's Healthy Teeth, BOCES #831-150, 11 minutes

Kits:

Dental Health School Presentation Kit, pamphlets, posters, tooth-
brushes, and toothpaste, Proctor and Gamble, P.O. Box 599,
Cincinnati, Ohio, (Professional Services Division), materials
available through American Dental Association, 211 East
Chicago, Illinois 60611

Learning About Oral Health - A Prevention-Oriented School Program,
Level II - (4-6), American Dental Association

Filmstrips:

Billy Meets Tommy Tooth, American Dental Association, 211 East
Chicago Avenue, Chicago, Illinois 60611

Good Dental Health Is Up To You, Professional Services Division,
Proctor and Gamble, P.O. Box 503, Cincinnati, Ohio 45201

The Teeth, BOCES #401-13

Filmstrips and Records:

The Healthy Way in Wonderland - "The Neat Bird", BOCES #392-22

How to Be A Good Landlord to Your Teeth, BOCES #392-21

Your Mouth Speaking, 7 filmstrips, Walt Disney Educational Materials, Department F, 800 Sonora Avenue, Glendale, California 91201

One Act Play:

"The Toothache Mystery", American Dental Association

For information about Dental Health Education materials such as fluoridation, professional aids, periodicals, pamphlets and audio visual materials write to:

American Dental Association
Bureau of Dental Health Education
211 East Chicago Avenue
Chicago, Illinois 60611

A catalog and sample copies of printed materials are supplied FREE upon request.

HEALTH STATUS AND DISEASE PREVENTION AND CONTROL

OVERVIEW

Pupils can be helped to achieve and maintain lasting fitness through sound programs of health education and physical education, especially when they compliment each other. This is true for all children, despite variations in the skills which they bring to physical activities. Because physical fitness is not directly related to academics, it is an area in which children with severe academic problems can achieve emotional growth through pride in their accomplishments. Confidence is developed, with the result that the child is willing to try tasks which seemed impossible before, both in the gym and in the classroom.

The school health education program, especially its physical fitness portion, should be related to the physical education program, for each reinforces the other. Children can learn to use their bodies more efficiently when they understand a few of the basic facts about structure and function. Knowledge of good health practices can also improve performance in sports and games.

In some cases, the children with a disability may have had so many unpleasant contacts with doctors and hospitals at an early age, that they are fearful of all health personnel. With these children it is essential to develop an understanding of the vital services these individuals perform and of the fact that their help can be preventative, too.

Because most children with academic limitations have not only observed the fact that variation exists among individuals, but have suffered intensely from feelings of inferiority, teachers of health education should help each child learn to measure his present skills by his own past skills, and his present performance by his own past performance, rather than comparing himself/herself with other children. The child can be shown that this is a technique borrowed directly from the health personnel, and that it is only one of many ways that doctors, nurses, and others can help.

OBJECTIVES

1. List the basic steps necessary for body fitness.
2. Describe the roles of various school health personnel in the total school health program.
3. Relate the role of community health personnel in preventing health problems and improving health status.
4. Define those daily activities which have a positive effect on personal health.
5. Evaluate personal health practices as they relate to health status.
6. Describe how growing and developing occurs unevenly for body parts, systems and functions.
7. Predict the kind of growth and developmental changes that may occur during adolescence.
8. Describe the communicable disease process.
9. Identify man's role in the transmission of disease.
10. Identify fundamental principles of disease prevention.
11. Demonstrate personal habits that will protect oneself and others from communicable disease.
12. Differentiate between communicable and non-communicable disease.
13. Describe the body's natural defenses against disease.
14. Conclude that immunization prevents and controls some diseases.

MAJOR CONCEPTS

1. The individual has a definite responsibility for his personal health and fitness.
2. It is important for the individual to appreciate, understand and take into careful consideration the findings of the many people concerned with his health status. (Physician, nurse-teacher and dental hygiene teacher, etc.)
3. The health examination is valuable in detecting early signs of defects, disease and growth variations.
4. Physical activity should be planned as part of one's daily routine.
5. Sleep, rest, and relaxation prepare the body for work and play.
6. Engaging in hobbies, or changing one's activities helps one to relax.
7. When posture is good, the bones and muscles are aided in working properly to keep the body in balance.
8. All communicable diseases are caused by infectious agents.
9. Many diseases, such as degenerative diseases, which attack man, cannot be transmitted from one person to another.
10. Age, sex and heredity sometimes influence an individual's susceptibility to disease.
11. Great differences exist in height, weight and body build among children - all of whom may be quite healthy but growing in the way that is right for them.
12. Some disease control measures are very specific (immunization) while others are very general (sanitation).
13. A disease is not limited to one locale - it can spread from community to community; from one country to another.
14. Good sportsmanship adds to the enjoyment of play activities.
15. A cause-effect relationship has been established between germs and disease.
16. Group behavior may affect the health of each individual in the group.
17. All good grooming practices are important to one's appearance and health.

CONTENT OUTLINE

- I. Our Health Can Be Measured
 - A. Each person is different
 - B. Health appraisals are part of our school program
 - 1. Medical check-over
 - 2. Seeing and hearing
 - 3. Teeth and gums
 - 4. How tall and how small
- II. Appraising a Person's Health
 - A. Indicators of positive health behavior
 - 1. Responsibility to self and others
 - 2. Responsibility of the classroom teacher
 - 3. Responsibility of the parent
 - B. Personnel interested in the health status of the individual
 - 1. Health service staff
 - a. Physician
 - b. Nurse-teacher
 - c. Dentist
 - d. Dental hygiene teacher
 - 2. Other school personnel
 - a. Psychologist
 - b. Guidance counselor
 - c. Speech therapist
 - d. Reading specialist
 - e. Social worker
 - f. Attendance teacher
- III. A Perspective on Health
 - A. Plan
 - 1. Proper nutrition
 - 2. Sleep, rest, and relaxation
 - 3. Avoiding habit-forming and addicting substances
 - 4. Safety in everyday activities
 - 5. Caring for the skin, hair, and nails
 - 6. Good posture habits
 - a. Standing
 - b. Sitting
 - c. Walking
 - B. Health status and individual differences
 - 1. Social-emotional fitness
 - 2. Physical fitness
- IV. The Hidden and Obvious Nature of Disease
 - A. Communicable diseases
 - 1. Definition
 - 2. Transmission
 - a. Germs
 - b. Vectors such as man and animals
 - c. Other vehicles such as soil, plants, food water, and air.

V. Modern Disease Control

- A. Immunization
- B. Public health measures
 - 1. Sanitation
 - 2. Research
 - 3. Diagnostic techniques
- C. Health Education
 - 1. School
 - 2. Home
 - 3. Public health education
- D. Treatments
 - 1. Medical
 - 2. Surgical
 - 3. Rehabilitation

VI. Significance of Disease

- A. Personal efficiency
- B. Longevity

LEARNING AND EVALUATIVE ACTIVITIES

1. Bring in and display pictures of your favorite sport or sport hero. Discuss this activity or personality with class.
2. Discuss the reason for playing outside when possible.
3. Activity: Perform strength building exercises and stunts.
4. Examine sport pictures and relate the contribution of each activity to physical fitness.
5. Give examples of good sportsmanship in play activities.
6. Dramatize and discuss good sportsmanship.
7. Dramatize what happens when pupils do not get enough sleep.
8. Write about or draw pictures of favorite ways to exercise.
9. Discuss the kinds of outdoor activities participated in at school and at home and what they contribute to health.
10. Construct figures with pipe cleaners or clay demonstrating various physical activities.
11. Assemble a human body by cutting out pattern of separate parts, then assembling them with brads; dramatize movements of body parts on finished figures.
12. Have school nurse-teacher visit class for a preparatory talk before physical appraisals, weighing and measuring, vision and hearing testing.
13. Have dental hygiene teacher come to class for preparatory talk before dental appraisal.
14. Pantomime: preparation for school; washing face and hands, combing hair, and putting on clothes.
15. Oil one sheet of paper and sprinkle dirt and dust on it. Sprinkle dirt on a clean sheet of paper also. Relate it to skin cleansing.
16. Puppet play of a child who argues with his parents not to go to bed. Older sibling comes in to explain benefits of sleep.
17. Play records for certain movements.
18. Have child help in maintaining an appraisal of health status checklist.

Positive Signs

1. A strong well-built skeleton
2. Sound well-formed teeth
3. Erect posture
4. Healthy color to skin

5. Well-developed muscles
 6. A moderate padding of fat
 7. Eyes bright and clear
 8. Facial expression alert and happy
 9. Hair smooth, glossy and luxuriant
 10. Child reports sound and refreshing sleep
 11. Child reports good appetite, good digestion, and regular elimination
 12. Mucous membranes of mouth and eyes are reddish pink
 13. Fingernails and ears are a reddish pink as seen under light
19. Have students pass a ball representing germs to one another. Call the ball "Chicken Pox," "Flu" or some other childhood disease. Discuss.
 20. Ask children to tell of individual experiences when ill - who was first to help, who did what, etc. Have them construct posters showing the people who helped.
 21. Use an atomizer to demonstrate how coughing and sneezing spread germs. Contact local American Lung Association for photographs showing actual range of cough and sneeze spray.
 22. Have nurse talk about tuberculosis and the tuberculin testing program.
 23. Discuss the importance of a "runny" nose when one has a cold. Relate this to irritation caused by germs.
 24. Discuss the importance of using your own toothbrush, handkerchief, drinking glass, etc.
 25. Explain how germs enter the body through cuts in the skin; explain how to cleanse and why this is important.
 26. Discuss what life for children must be like in countries where there are few or no doctors.
 27. Have students draw pictures illustrating ways germs travel, such as by touch, various insects, milk, water, food, etc.
 28. Have children design TB/RD Christmas seals.
 29. Invite a pediatrician and/or psychologist to class to discuss how individuals grow and develop physically and emotionally.
 30. Discuss some current figures who are accomplishing in spite of handicaps.
 31. Discuss the reasons for visits to the physician, dentist, dental hygienist, school nurse and school psychologist.
 32. Have the class name and describe other health personnel.
 33. Display doctor's instruments or pictures of them. Let the children listen to the heart and lungs with stethoscope. Discuss the values of an annual health examination.

34. Discuss the effect of exercise on the heart, circulation and respiration.
35. Discuss: "How can children and adults get the exercise they need living in this mechanized society."
36. Class discussion of all possible ways to prevent spread of disease. Review with the students the things they can do to help keep from spreading disease germs: wash their hands before eating and after using the toilet; cover coughs and sneezes; keep pencils and fingers out of the mouth; use their own towels and washcloths; avoid drinking from a common drinking cup; and stay home from school if they have a cold.
37. Students might discuss how they and their families sometimes help improve the health of children around the world. This is done by Halloween collections for UNICEF - a branch of the World Health Organization devoted to the welfare of the world's children. Purchase of UNICEF Christmas cards and note paper also helps provide money to aid UNICEF in its works.
38. Examine drops of water (rainwater, river water) under a microscope. Report on types of living organisms found.
39. Stress that the immunity acquired from having a disease is more effective than the protection achieved by vaccines. Naturally acquired immunity lasts longer, often for a lifetime. But having a disease carries with it certain dangers. Thus, measles may have complications that lead to deafness or blindness. The use of vaccines to keep people from having communicable diseases represents a giant step forward in preventive medical care.
40. Ask pupils to tell what they would look for if they were sanitary inspectors: at a restaurant, at a dairy, at a dairy farm, at a food store.
41. Pupils may wonder why pasteurization is necessary if safety precautions are taken at the dairy farm and en route to the dairy. It is necessary because some milk is still handled under conditions that are not ideal. Improper cooling or inadequate protection against flies, dirt, and droplet infection are among the conditions that may exist. Thus, pasteurization is an essential safeguard, not a substitution for cleanliness.
42. The class might take a trip through a local restaurant or food store at an off-hour. The purpose would be to elicit information about the procedures used for maintaining cleanliness, for preventing food spoilage, and for obtaining certification. If the entire class cannot go, an individual might volunteer to make the trip with his parents and report to the class.
43. Discuss controls of communicable diseases and non-communicable diseases - how they are alike and different. Make posters or bulletin board displays.
44. When they are studying about air pollution, pupils might be asked to prepare an outline on the subject. Using these main topics - Sources, Effects, and Methods of Control - they might supply subtopics. Two books you might recommend to your pupils while they are studying about

air pollution are John Marshall's The Air We Live In - Air Pollution: What We Must Do About It (Coward) and Alfred Lewis' Clean the Air! (McGraw-Hill).

45. Bacteria Experiment: Show that germs "like" a warm, moist, and dark atmosphere in order to thrive and multiply.
Crush several dried beans. Place half of the beans in each of two containers. Cover with water. Store one of the containers in a warm, dark place and the other one on the classroom sill. After several days note the results.
Secure two apples. Peel them and place one in a dark moist, warm place; leave the other exposed to the air and sunlight.
Note the results in a few days.
46. To demonstrate the need for refrigeration in preserving foods, obtain two glasses of milk and cover them. Put one in the refrigerator and leave the other outside at room temperature. Compare the milk in each glass for several days noting the difference in appearance, texture and taste.
47. Review with pupils some ways of finding out about the local water supply and about what efforts are made to avoid pollution of it: for example, by asking parents, by talking to neighbors, by writing a letter to the city water department for information, by writing to the state public health department, by doing research at the public library, by reading current articles and news items on environmental pollution.
48. Preparation of a "Health and Disease" notebook by each student, or committee.
49. Discuss the opportunities for individual and group sports within the community.

RESOURCES

Books:

The Human Story, BOCES; Scott Foresman Co.

Karen Gets a Fever, Gilbert Miricem; Medical Books for Children;
Lerner Publications Company, 241 First Avenue North, Minneapolis,
Minnesota 55401

Pathways to Health Series, J. Keogh Rush; Globe Co., Inc., 175 Fifth
Avenue, New York, N. Y. 10010

Peter Gets the Chicken Pox, Marguerite Rush Lerner; Medical Books for
Children; Lerner Publications Company, 241 First Avenue North,
Minneapolis, Minnesota 55401, 1959, 618.92

The True Book of Your Body and You, Alice Hinshaw; Children's Press,
Chicago, Illinois, 1959. 613

H

Your Wonderful Body, Robert J. R. Follett; Follett Publishing Company,
Chicago, Illinois, 611

F

Films:

Alexander Learns Good Health, BOCES #831-8, 11 minutes

Be Healthy, Be Happy, BOCES #831-189, 11 minutes

Bright Life, Midwest Film Studios, 6808 N. Clark Street, Chicago

Clean and Neat with Harv and Marv, BOCES #831-403, 11 minutes

Mechanics of Life Series:

Blood and Circulation, BOCES #831-256, 9 minutes

Bones and Joints, BOCES #831-257, 9 minutes

Breathing and Respiration, BOCES #831-258, 9 minutes

Muscles and Movement, BOCES #831-260, 10 minutes

Scott Goes to the Hospital, BOCES #831-404, 11 minutes

Sleepyheads, BOCES #831-314, 10 minutes

Filmstrip:

How to Catch a Cold, Walt Disney, Glendale, California 91201, \$3.00

Filmstrip and Cassette Set:

The Healthy Way in Wonderland, BOCES #392-22

Pamphlet:

The Story of Morris the Mule, by Jane Little - from the York-Toronto
TB and Respiratory Disease Association

DRUGS, ALCOHOL AND TOBACCO

OVERVIEW

Until recently tobacco smoking was something that one could take or leave without undue concern that smoking presented any obvious risk to health or life. Today, physicians and other scientists know about possible hazards in smoking, especially cigarette smoking, yet controversy over this subject still continues.

A handicapped child usually does not understand the euphemistic statements which cigarette manufacturers use to comply with federal regulations about advertising. Who is the Surgeon General? What is the difference between "hazardous" and "dangerous?" Formerly it was assumed by both parents and educators that the subjects of alcohol, drugs and tobacco would be handled, and rightly so, within the home. However, many parents find these topics too difficult to deal with in an unemotional way. The teacher must take the responsibility for interpreting manufacturers' attenuated warnings -- "Cigarette smoking may be hazardous to your health.."

What is the most effective way to communicate this idea? In such fields scare tactics have been shown to be less effective than an approach which emphasizes the positive. Teaching that a person who does not smoke feels better, can breathe more efficiently for active sports, and has all his money that he would have spent on cigarettes left for more interesting pursuits, may well have better results.

Similar techniques can be used with the problems of alcohol abuse and illegal drugs. Interpret what the child is reading and hearing in the news. Make him aware of the dangers, but emphasize the positive aspects of avoiding these problems. The level on which the discussion is held can vary, but the topic is one which is of interest and value to every child.

OBJECTIVES

1. Express an awareness that drugs and household chemicals have proper uses, but that their potentially dangerous nature demands the student's respect.
2. Use prescribed drugs and volatile substances in a sensible manner which will contribute to long-range good health for themselves and for those in their community.
3. Relate an understanding of the factors which contribute to drug abuse.
4. Develop an awareness of the laws governing drugs and narcotics.
5. Identify the kinds of mood-modification caused by drugs.
6. Describe the varieties of drug use.
7. Analyze the various ways that drugs affect people.
8. Relate the basic role drugs play in the control of disease and pain.
9. Explain how personal, social, family and environmental forces influence drug use, non-use or abuse.
10. Conclude various relationships of drug abuse to personal and social consequences.
11. Analyze the factors which influence self-medication.
12. Examine how the media influences the use of over-the-counter drugs.
13. Differentiate between prescription and non-prescription drugs.
14. Describe the beneficial uses of various drugs.
15. Outline the conditions under which prescription drugs can be sold.
16. Relate how one's emotions and feelings affect decision-making.
17. Define and give examples of ethyl and methyl alcohol.
18. Describe the food values found in ethyl alcohol.
19. Describe several effects of alcohol on the body.
20. List and explain the ramifications of excessive drinking on one's personal life.
21. Interpret the ramifications of excessive drinking on the community.
22. Show, explain and illustrate the effects various media advertising may have upon the individual and his decision whether to drink or not.

23. List the health hazards associated with smoking as they pertain to the individual and society.
24. Identify biased information in cigarette and tobacco advertising.
25. State advantages of good health in leading an active, productive life.
26. Express supportive statements to the thesis that it is very difficult for a confirmed habitual smoker to quit smoking.

MAJOR CONCEPTS

1. Drugs, in legal products, are medical tools that may have many benefits when properly used.
2. Drugs and other substances are used for many reasons, but if misused, may be harmful.
3. Drugs may be classified according to their effects.
4. Production, distribution, and use of drugs are controlled by law.
5. Individual acceptance of responsibility is essential to the wise use of drugs.
6. Your future can be significantly affected by some of the decisions which you make early in life.
7. The pre-adolescent and adolescent need to belong to a group can be a factor in drug abuse.
8. There are different types of alcohol.
9. Ethyl alcohol is found in alcoholic beverages.
10. Methyl alcohol is highly poisonous.
11. Alcohol has little nutritive value.
12. Alcohol is used to manufacture many products.
13. Beverage alcohol can be used for medicinal reasons and may be classified as an anesthetic, narcotic, sedative, tranquilizer, or hypnotic.
14. Alcohol affects the various body systems and organs.
15. Alcohol is absorbed readily from the stomach and small intestines.
16. Most of the alcohol that enters the body is eliminated by the kidneys via the urine.
17. The frequent and prolonged abuse of alcohol can cause sickness and nervous disorders.
18. The problem drinker usually has problems with his self-concept.
19. The use of alcohol is a factor in many safety problems.
20. The misuse of alcohol often affects employment and efficiency on the job causing financial hardship to the problem drinker's family.
21. Alcohol misuse causes difficulties with family relationships, especially in the areas of cooperation and respect, and may lead to separation or divorce.

22. The misuse of alcohol is a factor in much of the crime that occurs.
23. Alcoholism is an illness, but treatment is available.
24. The driver who has been drinking is a menace on the highway.
25. The young person's decision about smoking is one of several important decisions in his life and should be based on a firm foundation of scientific knowledge.
26. Each individual is unique and therefore each of us arrives at our decision about smoking a different way.
27. Whether the individual starts to smoke or not, the decision is ultimately a personal one.
28. The ability to make an individual, personal decision not to smoke in spite of the opinions and practices of friends and acquaintances is evidence of developing maturity.
29. The decision to smoke or not to smoke should be based upon an intelligent interpretation of facts and not upon peer pressure or a personal desire to appear "grown-up."
30. Smoke from tobacco is made up of gases and particles.
31. When a person inhales smoke, gases and particles enter his breathing passages and are deposited on the surfaces. Some are absorbed in the blood and some remain to produce damaging effects on the lining membranes.
32. A young person who is largely dependent on his parents for food, shelter, and other life necessities, should consider the attitude of his family before starting to smoke.
33. The disadvantages of smoking far outweigh any "advantages" one might imagine.
34. Early users of tobacco were not aware of the consequences of smoking.
35. Tobacco production and distribution has become a very important segment of our national economy.
36. The incidence of heart disease, lung cancer, and other respiratory diseases has increased rapidly in proportion to the consumption of cigarettes.
37. Until recent years, our knowledge of tobacco's effects on the body has been shrouded in myth, superstition, and lack of knowledge.
38. The Surgeon General's Report on smoking and its conclusions have been accepted by the medical profession and other professional groups.
39. Overwhelming evidence has been compiled which indicts cigarette smoking as a cause of lung cancer.
40. The effect smoking has on retardation of ciliary action may aggravate cold symptoms.

41. For maximal growth, development, and performance, one should avoid the use of tobacco.
42. A wise decision is based upon factual information and mature judgment.

CONTENT OUTLINE

I. Sources and History of Use of Drugs

- A. Definition of drugs
- B. Main source of drugs
 - 1. Plants
 - 2. Animals
 - 3. Minerals
 - 4. Laboratory

II. Prescription and Nonprescription medicines

- A. Prescription medicines
 - 1. Criteria, e.g. severity of disease, age, weight
 - 2. Where purchased
 - 3. Necessity of following directions
 - 4. Disposal of left-over medicine
- B. Nonprescription medicines
 - 1. Reasons for use
 - 2. Label directions
 - 3. Examples
 - a. Vitamins
 - b. Laxatives
 - c. Cold remedies
 - 4. Precautions to observe when taking nonprescription medicines

III. Drugs Have Many Uses and Effects

- A. Effective uses, e.g. relieve pain, prevent disease
- B. Effects of drugs differ according to various factors
 - 1. Weight
 - 2. Sex
 - 3. Age
 - 4. Mood
 - 5. Health status
- C. Unexpected response
- D. Side effects
- E. No response
- F. Variations in dosage
- G. Interaction of drugs taken together

IV. Drug Misuse

- A. Medicines are misused in various ways
 - 1. By sharing medicine without consultation of a doctor
 - 2. Through self-diagnosis
 - 3. Use of left-over prescription medicines
 - 4. Through overdosage - accidental or intentional
 - 5. Underdosage
- B. Dangers associated with misuse of drugs
 - 1. Development of dependence - psychological, physical
 - 2. Death
- C. Various common substances have an abuse potential that can be harmful
 - 1. Alcohol
 - 2. Amphetamines and diet pills
 - 3. Analgesics, pain relievers
 - 4. Barbiturates and sleeping medication

5. Certain foods
 6. Cough syrups
 7. LSD, mescaline, other hallucinogens
 8. Marijuana
 9. Narcotics
 10. Toxic solvents and aerosols that may be sniffed
 11. Tobacco
 12. Tranquilizers
- D. Commonly abused drugs most frequently affect the brain and nervous system consequently altering body reactions
1. Stimulate or depress the central nervous system
 2. Induce hallucinations, alter perception and performance
 3. Create a state of dependence
 4. Alter mood and behavior
- E. Reasons for misuse of drugs
1. Result of a lingering illness
 2. As a "crutch"
 3. Result of habitual use
 4. Belief that abuse is a sign of maturity or sophistication
 5. Desire for peer acceptance
 6. Family members do
 7. Curiosity, desire to experiment
 8. Rebellion
 9. Dissatisfaction with self, school, etc.
 10. Because of disappointment
 11. Desire for instant gratification
 12. To avoid facing and solving daily problems
 13. For kicks
 14. Feeling of hopelessness
- V. Common Household Products
- A. Many products, properly used, provide essential benefits
i.e. paint thinner, gasoline, cleaning fluids, rubbing alcohol
- B. Reasons for misuse of such products
1. By accident
 2. By experiment
 3. By failure to read and follow directions
 4. Lack of knowledge
 5. On a dare or challenge
- C. Ways of misuse
1. Swallowing
 2. Inhaling
 3. Injection
 4. Absorption through the skin
 5. Substitution - i.e. gasoline to start fire in barbeque pit
- D. Potential consequences of product misuse
1. Nausea, vomiting
 2. Suffocation
 3. Poisoning
 4. Organic damage
 5. Mental damage - temporary or permanent
 6. Death

VI. Assuming Increasing Responsibility for Personal Health

- A. Part of growing up is becoming independent, responsible for personal health and the health of others
 - 1. A child must tell adults when he is ill
 - 2. A doctor's advice must be followed
- B. Good health habits must be established early
 - 1. For a longer and happier life
 - 2. As a force in determining choice of work and play
 - 3. Preventive against the high costs of illness
 - 4. As a force in determining future plans and successes
- C. Habits develop in several ways
 - 1. Through motivation
 - 2. Through conscious effort
 - 3. Without conscious effort
 - 4. Through influence of friends and their behavior
- D. Some habits affect health
 - 1. Personal health habits - i.e. eating, exercising, resting
 - 2. Study habits
 - 3. Safety habits
 - 4. Recreational habits
 - 5. Habits of using medicines, drugs, and other substances
- E. Problems of drug abuse may be avoided by
 - 1. Making wise choices based on accurate information
 - 2. Having courage to say "no" to experimenting
 - 3. Knowing and respecting laws
 - 4. Recognizing the hazards of misusing any product
 - 5. Recognizing that healthy individuals do not need regular medication
 - 6. Recognition of everyone's responsibility in the prevention of drug misuse
 - 7. Being informed of agencies that enforce laws
- F. Potential for benefit or harm varies with use.

VII. Nature of Alcohol

- A. Definition and properties
 - 1. Ethyl alcohol - beverage
 - 2. Methyl alcohol - poisonous
- B. Calories
- C. Commercial uses of alcohol in food and medical products, flavoring, solvents, medicines, and antiseptics
- D. Medical uses

VIII. The Use of Alcohol in America

- A. Colonies
 - 1. Virginia
 - 2. New England
- B. Today

IX. Alcohol in the Human Body

- A. Absorption
 - 1. Stomach
 - 2. Small intestines

.B. Effects on Systems

1. Nervous
2. Circulatory

C. Elimination

X. Alcohol and Problems

A. Personal problems

1. Sickness, nervous conditions
2. Employment
3. Self-concept
4. Safety

B. Family problems

1. Financial
2. Social
3. Parental
4. Marital

C. Community problems

1. Safety
2. Unemployment, welfare
3. Remedial
4. Crime
5. Courts
6. Police

D. Alcoholism, A Sickness

1. Recognized as a disease
2. Treatment and rehabilitation

XI. Deciding About Alcohol Use

- A. Economic aspects
- B. Socially acceptable uses
- C. Learning attitudes

XII. Man's Use of Tobacco

- A. Early use of tobacco by the Indians (1492-1600)
- B. Use in the English colonies in America (1600-1800)
- C. Recent history (1800-present)
- D. The modern tobacco era
 1. The United States is a world leader in tobacco
 - a. Production
 - b. Consumption
 2. Certain of our states base a large portion of their economy on tobacco industry

XIII. Tobacco and Health

- A. Causes for concern in recent years
 1. Increase in heart disease
 2. More deaths due to lung cancer
 3. Shortened life expectancy of smokers
- B. Increased tobacco use in the United States
 1. Per capita cigarette consumption increased since 1900
 2. Corresponding increase in incidence of lung cancer and other cardio-respiratory illnesses
 3. Consumption of pipe tobacco and cigars has decreased
 4. Smoking by teenagers has increased

C. Other effects of tobacco

1. Effects on the respiratory system
 - a. Interferes with normal breathing
 - b. Athletes are instructed not to smoke
 - c. Tendency toward more frequent colds of longer duration
2. Effects on the digestive system
 - a. Smoking tends to reduce one's appetite
 - b. Interferes with the ability to taste and enjoy food
3. Effects on heart
 - a. Smoking increases heart rate
 1. Disadvantages to the Athlete
 2. Affects efficiency of body muscles
4. Growth and Development
 - a. Decrease the desire for food
 - b. Deprives body of fresh air necessary for the growth of tissue

XIV. Deciding About Smoking

A. Important considerations

1. Effects of smoking on one's health
 - a. Content of smoke
 - b. Physiological effects
2. Effects of smoking on physical performance
3. The expense of smoking
4. The smoking habit may last your lifetime
5. Safety implications of smoking
6. Attitudes of parents and other family members
7. Uniqueness of the individual

B. Making the right decisions

1. A mature decision based on a clear understanding of tobacco and its use
2. The extent to which a person is "grown up" is not measured by his decision to smoke

LEARNING AND EVALUATIVE ACTIVITIES

1. List examples of drugs which come from plants, animals, and minerals, and which are synthesized in laboratories.
2. Ask a physician to discuss how treatment with modern drugs affects illness.
3. Discuss dangers of taking less than, as well as more than, the prescribed amount of a medicine.
4. Explain main purposes of prescription medicines.
5. Have children ask their parents for what illnesses they commonly use non-prescriptive medicines and list such medicines commonly found in their home.
6. Invite a nurse to discuss constructive use of medicines motivated by positive attitudes of self-protection.
7. Invite a pharmacist to talk about the dangers and penalties of misuse of prescription drugs.
8. Identify proper uses of common household products.
9. Show children the warning label on a harmful substance and teach its meaning.
10. Describe constructive, safe ways to show independence - i.e. help family members.
11. Have children develop a list of responsibilities for health which they can assume.
12. Evaluate personal habits to determine their effects upon total health.
13. Ask students to explain orally or write a short paragraph to support the fact that medicines are not a substitute for good health.
14. Describe some of the physical and psychological effects of improperly used drugs and volatile substances - both immediate and long-range.
15. Discuss the effect of drug abuse on one's future.
16. Discuss how great harm can result from "taking a dare" involving the use of unknown substances, candy from strangers, etc.
17. Discussions of reasons why children go to a doctor.
18. Collect and show labels to the class from prescription and nonprescription medicines.
19. Have children make posters on how drugs as medicines contribute to healthful living.
20. Have children describe how their friends affect their behavior. Discuss: "Should one always follow a friend's advice?" and "Are there disadvantages in following the leader?"

21. Role-play how to cope with pressure from friends who insist that others use drugs.
22. Have students list health problems that may result from drug misuse.
23. Ask children to survey their homes, under supervision of an adult, to learn where potentially harmful substances are stored. Report to the class on safe places to store substances.
24. Discuss the good and bad features of curiosity. Encourage pupils to look for positive ways to express curiosity.
25. Dramatize a situation in which a student is urged by his friends to take a dare and ingest an unknown substance.
26. Discuss the medicinal and industrial uses of alcohol.
27. Show a can of antifreeze or paint and study the contents used in the manufacture of the product.
28. Have students examine labels on bottles in the kitchen and medicine cabinet for alcoholic content.
29. Have students compare the body's use of alcohol with its use of proteins, fats, and carbohydrates.
30. Collect advertisements concerning alcoholic beverages and analyze them in class.
31. Discuss the elimination of alcohol by the body.
32. Class discussion: Excessive use of beverage alcohol may lead to problems.
33. Compare the cost of beverage alcohol and cost of nutritious foods.
34. Guest Speaker: (welfare society): Discuss the family problems related to alcohol:
 - Financial
 - Work efficiency
 - Child neglect
 - Respect for family members
35. Investigate reports of the National Safety Council relating alcohol as a causal factor in motor vehicle accidents.
36. Guest Speaker: Why some people do not or should not drink.
37. Have local policeman discuss the problems caused by drinking drivers.
38. Class discussion: What should be our attitude toward alcoholism?
 - Consider: Alcoholics are sick
 - Alcoholics can be helped
 - Alcoholics need greater public assistance and support
39. Guest Speaker: The role of Alcoholics Anonymous in helping alcoholics.

40. Create posters: Uses of alcohol (preservative, disinfectant, drug).
41. Scrapbook: Have pupils make a scrapbook to include pictures and articles concerning the problems created by the use of alcohol.
42. List the reasons teenagers and adults give for drinking. Evaluate them.
43. Oral and written reports: The effect of alcohol in sports, driving an automobile, flying, and in occupational skills.
44. Discuss how some people who drink to excess are those who are unable to face their problems and are using alcohol as a means of escape.
45. Discussion: Why do individuals who know how alcohol affects sensory perception still drive after they drink?
46. Bulletin Board: Illustrate and display pictures of accidents and other losses attributed to alcohol.
47. Draw and label a figure of a man showing the systems and organs affected.
48. Students dramatize a situation in which a ten year-old is encouraged to smoke by his friends. Ask class members how they might have reacted in a similar situation.
49. Suggest that each student ask the following question of his parents: "If you could make your decision to smoke or not to smoke all over again, would you start smoking?"
50. Have children tell about adults they know that have quit smoking or that have tried to quit. Why did they decide to quit? Were they successful?
51. Ask students to fold a piece of notebook paper in half. On one portion have them write "The Advantages of Smoking." On the other portion of the paper have students list "The Disadvantages of Smoking." Ask each student to proceed to list all of the advantages and disadvantages he can think of.
52. Use a smoking machine so children can see and smell substances that collect in the lungs.
53. Invite the school physician or school nurse-teacher to speak to your class about the increase in lung cancer, heart disease, and other illnesses associated with smoking.
54. Students develop exhibits for your school health or science fair.
55. Students might suggest various reasons why family members begin to smoke. Arrange these reasons on questionnaires and request that those who smoke check the reasons why they began smoking. Tabulate results. Use for a bulletin board.
56. Display the American Cancer Society exhibit - a wheelbarrow of cigarette butts and a jar of "tar". Perhaps your students can create equally effective displays.

57. A student committee might prepare a bulletin board on "Smoking and Fitness."
58. Have children select and bring to class a cigarette ad from a magazine or newspaper. After studying the ad have them change the message so it tells the other side of smoking. Makes an interesting bulletin display.

RESOURCES

Books:

About You and Smoking, Scott, Foresman & Co., Glenview, Illinois 60025

Basic Concepts of Alcohol, Laidlaw Brothers, Division of Doubleday & Co., Thatcher and Madison, River Forest, Illinois 60305

Basic Concepts of Tobacco and Smoking, Laidlaw Brothers, Division of Doubleday & Co., Inc., Thatcher and Madison, River Forest, Illinois 60305

You and Smoking: It's Really Up to You, Diane Gess, Ramapo House

Films:

Almost Everyone Does, BOCES #832-122, 14 minutes

Barney Butt, BOCES #832-277, 13 minutes

Drugs: The First Decision, BOCES #331-261, 9 minutes

Drugs and the Nervous System, BOCES #832-88, 16 minutes

Huffless, Puffless Dragon, BOCES #831-392, 8 minutes

Health Wreckers, BOCES #832-416, - minutes

I Think, BOCES #832-120, 19 minutes

Filmstrips and Cassettes:

Alcohol and Children, BOCES #392-2, 15 minutes

Drugs and Children, BOCES #392-3, 30 minutes

Smoking and Children, BOCES #392-1

Games:

Drug Attack, BOCES #110-30

Drug Decision, accompanying programmed text, teacher's manual, and workbook

Plans:

Alcohol Education Materials, BOCES #111-1, Parts I & II

Drug Education Information, BOCES #111-2, Parts I & II

Smoking, BOCES #111-22, Parts I & II

Public Service Agencies:

New York State Drug Abuse Control Commission (Pamphlets, films, charts, posters).

AFL-CIO Community Service Activities in cooperation with American Social Health Organization.

"A Handbook on Drugs for Youth, Parents, Teachers, The Public" - Steuben County Drug Abuse Council, Corning, New York.

Local Police Department - (Speaker and display of drugs).

County Alcoholism Information & Referral Center (Pamphlets, films, posters, charts, speakers).

Alcoholics Anonymous (speakers, booklets).

American Cancer Society (all types of materials).

American Lung Association (speakers and resource materials).

Local Fire Departments (safety factors).

Metropolitan Insurance Company (pamphlets).

"What's New On Smoking" (in print and on film), U.S. Department of HEW

MENTAL HEALTH

OVERVIEW

Mental health may be described as how one feels about oneself, how one feels about other people, and how one is able to meet the demands of living. These can provide starting points for teachers to work with students.

What characteristics are required in order to work? The individual must compromise his own wants and needs with the demands of the work situation. The sacrifices are real, but the rewards may be great.

The basic components of good mental health can be developed in the classroom, despite a home situation which does not foster it. A sense of identity -- a knowledge of who one is in relation to the family, school and community; a feeling of confidence -- the ability to approach new problems without undue fear; a realistic self image -- knowing one's strengths and accepting one's limitations are areas which can be developed in the special education classroom. The school is usually thought to rank second only to the family as most important in affecting the mental health of children.

OBJECTIVES

Suggested Pupil Outcomes:

1. Express his/her own definition of mental health.
2. Understand that good and poor mental health is relative to one's environment.
3. Compare the relationship between one's self-concept and how others see one.
4. Identify himself/herself as a person of worth.
5. Describe the consequences of accurate or distorted reality perception.
6. Describe how man's physical and social needs will be oriented by his behavior and environment.
7. Demonstrate respect for himself and others.
8. Behave in an acceptable manner in most situations and relationships.

MAJOR CONCEPTS

1. Knowing ourselves helps us to live with others. That the pursuit of happiness is an ideal goal, but not a routine achievement helps one to recognize what mental health is:
 - How you feel about yourself,
 - How you feel about other people
 - How you are able to meet the demands of life.
2. As we grow up we learn to control our own behavior.
3. We develop and change habits because of experience, environment and need.
4. Leisure time activities help develop creativity, friendships, skills.
5. Emotions are normal.
6. Friendships contribute to a person's well-being.
7. The personality consists of one's total "self" and his characteristic ways of reacting to life situations.
8. A healthy personality relates well to others and is able to adjust to the emotional, social and physical stresses of life.
9. Since inherited traits and life experiences are different for each human being, each of our total personalities is different from other personalities.
10. Body structure and function affect individual behavior and one's relationship with others.
11. We acquire prejudices from family, environment and experience.
12. Personality traits such as disposition and honesty, are not inherited but are largely the result of family and other environmental influences.
13. Skills (actual performance) such as playing the piano are not inherited, but potentialities for learning the skill (aptitude) are.
14. All people should have some insight into their own capabilities, strengths and weaknesses, and how to use these for further growth.
15. A need to drive is a conscious or unconscious desire that arouses activity in people.
16. Basic human needs are those whose satisfaction is necessary for man's essential welfare.

17. Needs for food, air, water and sleep are examples of man's basic physiological needs.
18. Individuals have psychological needs that are considered basic to their well-being. (Need for love, approval, independence, security, and feeling significant.)
19. As the individual grows and develops, he should become more responsible for himself and increasingly more considerate of other people.
20. Each individual affects the groups to which he belongs.
21. Feelings of forces that affect people's behavior are known as emotions, and include such things as sadness, loneliness, hate, fear, anger, love, etc.
22. Any given emotion (i.e. anger) may be expressed in either a positive or negative manner.
23. Our voice and actions reflect our feelings about ourselves.
24. Everyone is different. You can do certain things well, better than others; yet, some can do things better than you.
25. Working and playing together is part of growing up.
26. Good behavior is a part of growing up. Improving behavior tells others you are growing up.

CONTENT OUTLINE

- I. Mental Health
 - A. Student's concepts of mental health
 - 1. Factors influencing development of good and poor mental health
 - a. Dominating influence of family, environment, and experience
- II. Personality
 - A. Concept of personality
 - 1. Definitions
 - 2. Healthy personality
 - B. Development of personality
 - 1. Influence of environment and experience
 - 2. Influence of heredity
 - a. Body structure
 - b. Physical features
 - c. Rate of physical growth
 - d. Sex
 - C. What characteristics are not inherited?
 - 1. Traits
 - 2. Specific skills
 - D. Basic human needs
 - 1. Physical needs
 - 2. Social needs
 - a. Security
 - b. Love
 - c. Approval
 - d. Independence
 - e. Feeling significant
- III. Growing Toward the Teen Years
 - A. Development of the physical self
 - 1. Major growth periods
 - a. Middle and late childhood
 - b. Puberty and adolescence
 - 1. Growth rate of boys and girls
 - 2. Changes in the skin and hair
 - 2. Attitude towards the physically developing self
 - B. Development of the social self
 - 1. The individual and the group
 - 2. Peer relationships
 - 3. Sexual differences in social development
 - 4. Relationships within the family
 - a. Relationships with parents
 - b. Sibling relationships
 - C. Development of the mental self
 - 1. Understanding the concept of mental health
 - 2. Factors influencing development of good mental health
 - 3. Factors influencing development of poor mental health
 - 4. Importance of the dominating influence of family, environment and experience

LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss growing responsibilities now - care of possessions; respect for others' possessions; responsibilities for own appearance, actions.
2. Develop a sense of responsibility in classroom by having class "chores" for which the responsibility rotates.
3. Rearrange the physical appearance of the room to make living together in the classroom safer, more comfortable, friendlier, etc.
4. Discuss social skills, in the home, school, community, in your friends' homes (making introductions, etc.).
5. Discuss the differences between teasing and practical jokes.
6. Discuss the use of "bad" words.
7. Have a group discussion on the reasons for rules and laws.
8. Have the students keep a record of the use of their leisure time for a weekly period. Discuss how waste of time can be avoided.
9. Discuss differences in people: culture, customs, handicaps, races, economic groups.
10. Discuss how the appearance and attitude of older students influence younger students.
11. Discuss how we can meet and solve problems. Where is help available?
12. Discuss how to understand or tolerate another person's opinion. How can you control your reactions?
13. Conduct a class discussion on living with older people in the home, respecting rights of adults, school, community.
14. Discuss how your own behavior makes you feel - good behavior; poor behavior.
15. Discuss honesty, dishonesty, its effect on self and others.
16. Read stories in which students can see the characters in a variety of emotional experiences.
17. Dramatize or discuss negative emotional behavior. Discuss constructive outlets for "pent-up" anger; letting off steam, preventing tantrums.
18. Discuss worry, what causes it, how to avoid it, how to accept it.
19. Discuss Charlie Brown's book "Friendship Is..." - the give and take in a relationship.

20. List the qualities you like in other people. Which of these do you feel are the most important?
21. Discuss cliques (why they exist, etc.).
22. Discuss different types of friendships. (Older people, younger, sharing of an interest; community; school.)
23. Discuss attitudes that are important in friendship - forgiving, keeping confidences, observing privacy, avoiding possessiveness.
24. Discuss friendships, with other people, younger, peers.
25. Dramatize the proper reaction to offers made to students by strangers.
26. A discussion about the policeman being the students' friend will be desirable at this age. A visit to the classroom by a policeman will be helpful.
27. Draw pictures of what the nurse, teacher, school patrol do for children.
28. Discuss how children can help a new student in the classroom.
29. Discuss differences between inherited and acquired characteristics.
30. Have class discussion about the "Stages of Growth", including newborn, infancy, childhood, adolescence, adulthood. Discuss growth changes that take place at each stage and emphasize the idea of variations in growth at each stage.
31. Have children list human traits that can be changed.
32. List kinds of physical care that children need; food, clothing, shelter, etc. What are some of the effects if children don't get such care and protection? What things do children need protection from?
33. Have the class respond to: "The traits I like or dislike in a friend", or "What I like best about boys, or girls".
34. Discuss ways children can help the teacher and other children without having some specific job assigned to them.
35. List on the board some positive ways to manage emotions, such as anger: a. physical exertion, b. laughing it off, c. talking it out with someone.
36. Have pupils reflect upon ways in which fear can be constructive, protective.
37. Draw a picture or make a booklet of pictures of things I like to do.

38. Read stories that illustrate children in different behavior situations.
39. Arrange a hobby show in class to demonstrate, display and explain hobbies.
40. Make up plays about disappointments which occur and how they can be to your advantage.
41. Read stories to the class and discuss books related to differences in people.
42. Have the students demonstrate how to use class time effectively to complete required skills and allow for leisure time.
43. Make a list of things about yourself you would like to improve and how you will go about doing so.
44. Role-play situations showing how boys and girls should act with older persons. Try to include people from different age groups in the role-play.
45. Discuss the difference between humor and jokes that hurt.
46. Demonstrate how our voice and facial expressions can reflect our feelings although our words may not.
47. Discuss the differences between tattling and concern.
48. Make a bulletin board display showing needs of physical care that children have: food, clothing, shelter, etc.
49. Discuss how it feels to be "new" or "different" in a new class or neighborhood.
50. Talk about times you are happy. Times that you are sad (or other feelings); what causes you to feel this way?
51. Talk about what you can do when you feel upset. Discuss how you can help others when they are upset.
52. Discuss the many ways in which you can show kindness to others.
53. Teacher help children understand what is expected of them with others in classroom situations: how to wait, how to watch; how to play; how to share; how to help; how to accept a "no" or "yes" answer.
54. Draw a picture of your idea of what you may look like when you "grow up".
55. Have the pupils discuss the fashions, words, dances or games that are "in" with their peer group.

56. Role-play tension-arousing situations. Discuss the possible solutions.
57. Elicit from the class a list of acceptable hobbies and games including activities that an individual can do by himself.
58. Discuss things you can do now that you could not do when younger.
59. Talk about what you would like to be when you grow up.

RESOURCES

Books:

All About Me: Boy's Book, M.W. Hudson; Frank E. Richards Publishers, 1966. This book is designed to develop a youngster's positive self-image through the use of visual, auditory, factile and kinetic exercises. Available through SEIMC. FL-0038

All About Me: Girl's Book, M.W. Hudson; Frank E. Richards Publishers, 1966. A multisensory learning approach is used to help develop a healthy self-image in the youngster. Available through SEIMC. FL-0039

The Boy With A Problem, Joan Fassler; Behavioral Publishers, Inc., 1971. Johnny has a problem and it seems to that he doesn't feel like playing, or eating or anything! When his friend takes the time to listen to him, he begins to feel better. Available through SEIMC. FL-0168

Don't Worry, Dear, Joan Fassler; Behavioral Publishers, Inc., 1971. Jenny is a little girl who sucks her thumb, wets her bed and stutters on some of her words. The love and warmth her family gives her help her gradually to overcome all these problems. Available through SEIMC. FL-0169

Mental Health Series by Muriel Stanek; Benefic Press, Chicago, Illinois, 1967.

I Am Here, #E
S

I Can Do It, #E
S

My Family and I, #301.42
S

My Friends and I, #E
S

One Day Everything Went Wrong, Elizabeth Vreckin; Follett Publishing Company, New York, 1966. E
V

Removing Blocks to Mental Health, State Education Department, Albany, New York

Stories From Inside/Out, Orvis A. Harrelson; Bantan Books, Inc., School and College Division, 666 Fifth Avenue, New York, New York 10019, 1974

Books: (Con't.)

Stories From Inside/Out: A Discussion Guide For Parents and Teachers, Bantam Books, Inc., School and College Division, 666 Fifth Avenue, New York, New York 10019, 1974

There's Nothing To Do So Let Me Be You, Jean Horton Berg; Westminister Press, Philadelphia, Pennsylvania

Walk In My Mocassins, Mary Phraner Warren; Westminister Press, Chicago, Illinois

Films:

Barbara, BOCES #831-188, 7 minutes

Bike, The, BOCES #832-114, 13 minutes

Billy and the Beast, BOCES #831-343, 10 minutes

Eleanor Elephant, BOCES #831-283, 8 minutes

Faces, BOCES (video cassette), 5 minutes

Fairness for Beginners, BOCES #831-57, 11 minutes

Free To Be You and Me Series:

Part I Friendship and Cooperation, BOCES #832-426, 16 minutes

Part II Expectations, BOCES #832-247, 14 minutes

Part III Independence, BOCES #832-258, 17 minutes

Friends, BOCES #832-295, 18 minutes

Getting Along With Others, BOCES #831-10, 11 minutes

Hello Up There, BOCES #831-201, 9 minutes

Hopscotch, BOCES #832-141, 12 minutes

I Am, BOCES #832-231, 15 minutes

I'm Feeling Series:

I'm Feeling Alone, BOCES #831-395, 8 minutes

I'm Feeling Sad, BOCES #831-396, 10 minutes

I'm Feeling Scared, BOCES #381-397, 9 minutes

I'm Mad at He, BOCES #831-398, 8 minutes

I'm Mad at You, BOCES #831-399, 9 minutes

Films: (Con't.)

Inside/Out Series: BOCES (video cassettes), 15 minutes each

Because It's Fun

Bully

But Names Will Never Hurt?

But They Might Laugh

Can Do/Can't Do

Getting Even

How Do You Show

I Dare You

Jeff's Company

Just Joking

Lost is a Feeling

Must I/May I

Someone Special

When is Help

Yes, I Can

Little Engine That Could, BOCES #831-82, 11 minutes

Rock in the Road, BOCES #831-136, 6 minutes

Three Little Pigs, The, BOCES #8310285, 9 minutes

Tortoise and the Hare, BOCES #831-286, 8 minutes

Trick or Treat, BOCES #832-128, 15 minutes

What Should I Do Series:

The Fight, BOCES #831-278, 6 minutes

The Game, BOCES #831-279, 6 minutes

Lunch Money, BOCES #831-280, 6 minutes

The New Girl, BOCES #831-282, 6 minutes

The Project, BOCES #381-281, 6 minutes

Why You Are You, BOCES #831-270, 9 minutes

Ugly Duckling, The, BOCES #831-288, 8 minutes

Kits:

Dimensions of Personality Series:

I Can Do It, Grade 2, BOCES #123-77

What About Me, Grade 3, BOCES #123-8

Here I Am, Grade 4, BOCES #123-9

I'm Not Alone, Grade 5, BOCES #123-10

Becoming Myself, Grade 6, BOCES #123-11

Kits: (Con't.)

DUSO Kit I, Grades K-2, BOCES #123-17

DUSO Kit II, Grades 3-4, BOCES #123-18

Moods and Emotions Study Prints, The Child's World, Inc.,
Elgin, Illinois. BOCES #123-19

Filmstrips and Cassettes:

Growing Into Manhood, BOCES #333-90, 26 minutes

Growing Into Womanhood, BOCES #333-91, 26 minutes

Mental Retardation and Sexuality, 20 minute filmstrip with record.
\$20.00 purchase, \$5.00 rental. Order from Planned Parenthood
Association of Southeastern Pennsylvania, 1402 Spruce Street,
Philadelphia, Pennsylvania 19102.

*Teaching Good Conduct and Personal Hygiene to Retarded Teenagers,
5 filmstrips for boys and girls. Write to: Harris County
Center for the Retarded, P.O. Box 13403, Houston, Texas
77019. Filmstrip and written guide. Excellent resource.

Game:

The Ugame: Tell It Like It Is, BOCES #110-29

HEN:

Mental Health Materials, BOCES #HN-18

TEACHER REFERENCES

A Resource Guide in Sex Education for the Mentally Retarded,

Loewl Klappholz, Editor.

A 1971 revision of joint publication by two above organizations.

Editor is editor of Physical Education Newsletter, Croft Educational Services, New London, CT. Offers guidelines for helping mentally retarded children and youth in both residential facility or at home in the community; for programs currently underway or those yet to be started. Urges content be integrated with relevant aspects of existing curriculum; recognizes the variety of potential users of the resource, i.e. teachers, parents, counselors, professionals, para-professionals. Includes a number of valuable additional resources. Curriculum content organized into four categories: awareness of self, physical changes and understanding of self, peer relationships, and responsibility to society. Sample activities for each category. Write: Director, Project on Recreation and Fitness for the Mentally Retarded, AAHPER, 1201 16th Street, N.W., Washington, D.C. 20036 or SIECUS, 1855 Broadway, New York, New York 10023.

An Intensive Training Curriculum for the Education of Young Educable Mentally Retarded Children

Reports on research project of Palo Alto Medical Research Foundation and Medical Center, University of California, to demonstrate effectiveness of a social learning approach for education of young educable mentally retarded children.

Research conducted between January 1969 and December 1971.

Write: Sheila A. Ross, Senior Research Associate, Palo Alto Medical Research Foundation, Palo Alto, California 94305, or Bureau of Education for Handicapped Children, Office of Education, U.S. Department of Health, Education, and Welfare, Washington D.C. 20203.

Curriculum Guides for Family Life and Sex Education: An Annotated Bibliography, 1973

Order by code: FP#10 @ \$1.00 per copy from E.C. Brown Foundation, 1802 Moss Street, Eugene, Oregon 94703.

Education for Sexuality, Burt, John J., and Brower, Linda A., Philadelphia: W.B. Saunders Co., 1970

Facts About Sex, Sol Gordon, New York: John Day Co., 1973. 612.6
G

Facts Aren't Enough, Marion O., Lerrigo, et. al., NEA and American Medical Association, 1962. A very detailed look at the nature and need for sex education is presented in this booklet. It is written for adult use with children preschool through teenage years. PE-0627.

Guidelines on Planning a Training Course on Human Sexuality and the Retarded, Planned Parenthood Association.

How To Tell the Retarded Girl About Menstruation by Marion Jones. Emphasis is on similarity of physical development of mentally retarded girl and other girls. Simple explanation of menstruation which mother or teacher can use for retarded girl. Simplified illustrations. The Life Cycle Center, -- Kimberly Clark Corporation, Neenah, Wisconsin 54956.

Intellectual Level and Sex Role Development in Mentally Retarded Children, H.B. Biller and L.J. Borstelmann, American Journal of Mental Deficiency, 70:443, 1965.

Love, Sex and Birth Control for the Mentally Retarded - A Guide for Parents, Planned Parenthood Association of Southeastern Pennsylvania, 1402 Spruce Street, Philadelphia, PA 19102. \$.75 each.

Loving and Living II, Rocky Mountain Planned Parenthood, Denver, Colorado

Mental Retardation and Masturbation by Warren R. Johnson, 1967. Originally printed in April, 1967 issue of SEXOLOGY magazine. Author is head of Department of Health Education, University of Maryland. Dispels myths related to masturbation and sexual self-stimulation in retarded and normal children. Outlines several suggestions for those responsible for the behavior of the mentally retarded in helping them achieve emotional and mental maturity. For availability write to SIECUS, 1855 Broadway, New York, New York 10023.

Mental Retardation: A Family Study, E.W. Reed and S.W. Reed, Philadelphia: W.B. Saunders Co., 1965.

"New Directions for the Retarded", Joseph T. Weingold, Journal of Clinical Child Psychology, Vol. II, No I, Winter 1973.

Parents Responsibility, Marion O. Lerrigo, et. al., NEA and American Medical Association, 1970. Many parents feel hesitant about when and how to discuss sex with their youngsters. This pamphlet helps to guide them by suggesting many ways to handle common questions and situations which arise as youngsters "grow up" PR-0624

Publications List on
MR Sexuality and Sex
Education

SIECUS Publications Office
1855 Broadway
New York, New York 10023

Secondary Sex Development in Mentally Deficient Individuals, H.D. Mosier, H.J. Grossman and H.F. Dingman, Child Development, 33:273, 1962.

"Sex and the Mentally Retarded", Dr. A.N. Jennings, Rehabilitation In Australia, October 1970.

Sex Education and the Mentally Retarded, H.M. Selznick, Johnston Bull, 5:23, 1962.

Sex Education for the Mentally Retarded by Virginia Young Blackridge, MD, 1969. Discussion for parents who have an educable or trainable retarded child. Simplified information on physical development and sexuality. Emphasizes helping child enjoy living in an unsheltered life as possible commensurate with his intelligence. Discusses birth control, abortion, venereal disease, and homosexuality in relation to mental retardation. Divides material into that suitable for child with mental age of 1-3 years; 3-7 years; 3-10 years. Write: Alameda County Mental Retardation Service, 131 Estudillo Avenue, San Leandro, California 94577.

"Sex Education for the Mentally Retarded: An Analysis of Problems, Programs, and Research", Edward Vockell and Pamm Mattick, Education and Training of the Mentally Retarded, October 1972.

Sex Education for the Retarded Adolescent, S.L. Hammar, L.S. Wright, and D.L. Jenson. A survey of parental attitudes and methods of management in fifty adolescent retardates. Clinical Pediatrics, 6:621, 1967.

Sex Education of the Mentally Retarded Child in the Home by Evalyn S. Gendel, N.D., 1969. Originally presented as a paper to the Council for Exceptional Children in 1968 by chief of school health section. Emphasizes motivational factors. Stresses need for both non-verbal and verbal communication at the child's comprehension level. Generalized discussion of how to impart knowledge of sexuality to mentally retarded child, and importance of parents understanding the development of his sexual feeling to help him make life decisions. Stresses need for parents to seek resources of several disciplines to adequately help child. For availability write to: National Association for Retarded Children, Inc., 2709 Avenue E East, Arlington, Texas 76010.

Sex Education Information Inventory for Retarded Adolescent Girls, Karen Vockell, Linda Rosulek, Pamm Mattick, and Edward Vockell. Request from Dr. Edward Vockell, Department of Education, Purdue University, Calumet Campus, Hammond, Indiana 46323. An excellent guide and tool to be used in evaluating and designing a sex education unit for retarded adolescent girls. Includes diagrams, pictures, and inventory complete with written dialogue.

"Sexuality and the Mentally Retarded", Karl E. Thaller and Barbara D. Thaller, Office of Economic Opportunity, Washington D.C., 1973. (Extensive report on conference (- excellent) \$3.00.

"Sexual Problems of the Mentally Retarded", Frank J. Memolascino, Sexual Behavior, November 1972.

Social Attitude Approach to Sex Education for the Educable Mentally Retarded

A series of lessons developed in 1967 to help the educable mentally retarded student develop social skills and attitudes. Emphasis is on sex education. Sequential program for pre-primary through adolescence. Extensive bibliography of books and multi-media resources. For availability write: Special Education Curriculum Development Center, University of Iowa, Iowa City, IA 52240.

Special Education Guide for Teachers: Educable Mentally Retarded
Write for information on above to State Schools for Retarded Children, State Department of Education, Division of Public Schools, Jefferson City, MO 65101.

Summary Report of Workshop: Family Life and Sex Education for Teachers of the Mentally Retarded by Edward L. Meyen, 1969.
Summarizes workshop in which 42 teachers of mentally retarded considered guidelines for teaching sex education to mentally retarded. Emphasis on individual evaluation of materials, techniques for instruction, not attempt to provide teacher with "cookbook" approach to subject. Helpful guidelines for setting up similar workshops. For availability write to, Kansas City Social Health Society, Inc., 406 West 34th St., Suite 412, Kansas City, MO 64111.

FAMILY LIFE AND SEXUALITY

OVERVIEW

The study of human sexuality is a comprehensive and extensive study which should be taught in the home from infancy and supplemented in the school until maturity. Pupil participation in the suggested activities should help to produce desirable social attitudes and practices.

Sexuality and death are undoubtedly the two most difficult areas for the teacher to deal with objectively in the classroom. Each is surrounded in Western Culture by clouds of strong emotion. These emotions are determined not only by direct experience, but by the ethics and mores of one's nation, religion, subculture and family. They are complex issues and only fragments ever rise into conscious thought, so they are feared. It takes courage to attempt to confront one's feelings directly and honestly.

Children, especially mentally handicapped children, have characteristically been "protected" from death, a reality of life. Adults dealing with the educably mentally retarded child need to realize that it is easier to deal with death, though one's knowledge and understanding of it may be limited, than it is for the child to cope with a topic this is denied to exist. Therefore, the subject needs to be handled honestly and openly using the loss of a significant other (include a pet) as an opportunity of the child to grow emotionally another notch. It is essential that time and effort be given to the topics of sexuality and death during a handicapped child's education, and preferably repeated at intervals with the increased information and level of sophistication which his development will permit.

There are several reasons for this. First, the issue of the sexuality of the physically, mentally and emotionally handicapped is most often treated by avoidance, resulting in a great gap in knowledge and a lack of maturity in emotions. Second, one of the primary criteria for acceptance among members of the general population is the appropriateness of one's behavior in regard to persons of the "opposite" sex.

Third, it seems that traditionally, society has almost prohibited a normal sex life to the retarded individual. In earlier times this may have been because of a fear that the cause of the intellectual deficit would be inherited. Even after more was known about which conditions were genetic and could have an effect on succeeding generations, fear lived on. Its rational reason was perhaps concern about the ability of the mentally retarded parent to care for his/her child. It seems that to acknowledge the existence of sexuality in a child-person is impossible for most people, but it is a reality of life.

Now that sound, effective methods of birth control are available to all citizens, it is time to reconsider the handicapped person and his sexuality. An important step in this direction is taken when teachers and parents work together to teach the mores of human sexuality to the mentally retarded child.

OBJECTIVES

Suggested Pupil Outcomes:

1. Identify the family as the basic social unit in society.
2. Identify the types of family groups.
3. Define the role of various family members.
4. Identify characteristics of one's family environment.
5. Analyze environment as a factor in role arrangement of family members.
6. Explain why choices must be made in satisfying wants and needs.
7. Demonstrate attitudes which promote harmony.
8. Display interest in each member of the family and realize that each member should be interested in the well-being of every other member.
9. Care for personal belongings in the home.
10. Identify individual and family recreational activities.
11. Explain the significance of holidays as they relate to the family.
12. Identify economic factors which cause most parents to seek employment.
13. Explain the use and importance of money in the family unit.
14. Develop an appreciation for other nationalities and cultures and a positive attitude toward his/her cultural heritage.
15. Analyze factors which cause individuals to adapt to change within the family setting.
16. Practice proper personal hygiene taking into consideration the many changes which approaching puberty brings.
17. Understand that many changes take place during puberty.
18. Describe normal incidents of growth and development.
19. Identify the physical changes which take place in boys.
20. Identify the physical changes which take place in girls.
21. Identify the emotional changes which take place in girls.
22. Explain that life comes from life.
23. Explain that all animals produce babies of the same kind.

24. Explore the meaning of death.
25. Develop ways of dealing with the feelings brought about by the death of a loved person or pet.
26. Define death as an unavoidable part of the life process.
27. Distinguish between death and sleep.
28. Express feelings and emotions regarding loss of a significant other.
29. Conclude that there is a need to share love, empathy and sympathy with individuals who are experiencing an emotionally charged situation related to loss of a significant other.

MAJOR CONCEPTS

1. Each of us is a member of a family.
2. Each of us assumes various roles and responsibilities as a member of a family.
3. The family should foster the fullest development of each individual in the family.
4. Knowing ourselves helps us to live better with others both within and outside of our families.
5. Consideration of others' rights and property is important to happy family life.
6. Sharing helps to make the home a happy place.
7. Some feelings of anger and resentment expressed by brothers and sisters are natural.
8. There are similarities and differences in family life in other lands.
9. We learn about our environment at home and in school.
10. Families help others in the community.
11. Families do many things together.
12. Parents and adults at school and in the community help children to stay safe, happy, healthy, clothed, fed, and secure.
13. Families function to perpetuate man and fulfill certain health needs.
14. The process of mating is an evolutionary process.
15. Living things reproduce in many ways.
16. Related living organisms reproduce in similar ways.
17. Young animals have a need for home, food and parental care.
18. The human fetus develops in a unique manner; normal birth occurs when the fetus is developed sufficiently to survive.
19. Living things give birth in a variety of ways.
20. Each individual is a unique biological pattern caused by heredity and environment.
21. The newborn receives a share of his/her inherited characteristics from each parent.

22. Many significant changes take place during puberty.
23. Masturbatory experiences may follow genital handling.
24. The menstrual cycle is a natural event in the life of a young girl which indicates she has reached one new level of maturity.
25. Death is the ultimate end of all living things.
26. Dying and going to sleep are not the same thing.
27. Confronting and successfully coping with the loss of a significant other, whatever the cause for the loss, can be a source of emotional maturation.

CONTENT OUTLINE

I. The Family is a Unit

- A. What is a family
 - 1. There are many similarities
 - 2. There are many differences
- B. What are its purposes
 - 1. Transmit culture
 - 2. Train and educate
 - 3. Provide security
 - 4. Provide a source of love and understanding
 - 5. Provide recreation and other activity
- C. What are roles in the family?
 - 1. Father
 - 2. Mother
 - 3. Children
 - 4. Extended family members
 - a. Grandparent(s)
 - b. Aunt(s) and Uncle(s)
 - c. Foster children
 - d. Etc.
- D. How do we cope with the loss of a significant other?
 - 1. Death
 - 2. Divorce
 - 3. Separation

II. All Life Comes From Similar Life

- A. How is everyone unique?
 - 1. Males and females are different
 - 2. Personality develops at varying rates
 - a. Self-image
 - b. Self-confidence
 - c. Self-motivation and discovery
 - d. Respect and trust for others
 - e. Acceptance of occasional failure
 - f. Learn decision-making
 - g. Control emotions
 - h. Learn compassion
 - i. Know how and when to share
 - 3. Physical growth occurs at different rates
- B. How does a newborn baby affect the family?
 - 1. Parents care for the children
 - 2. Each child has a place in the home
 - a. Reasons for rivalry
 - b. Reassurance of love
- C. How do living things grow?
 - 1. Physical growth and development changes
 - 2. Social interaction expands out of the family

III. Understanding our Changing Body During Growth and Development

- A. Infancy
- B. Early childhood
- C. Preadolescence
- D. Adolescence

III. Understanding our Changing Body During Growth and Development (Cont.)

- E. Maturity
- F. Old age

IV. Background Orientation and Terminology Related to the Reproductive System

- A. Parts of the body
- B. Functions

V. Sex-Related Topics

- A. Secondary sex characteristics
- B. Menstruation
- C. Masturbation
- D. Infatuation, and crushes
- E. Sexual maturity and responsibility - developing standards of conduct

LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss the anatomy and physiology of the reproductive system of selected lower mammals and compare them with the human reproductive system.
2. Draw pictures of self - (boy or girl).
3. Discussion on "Where did you come from?" Clarify misconceptions.
4. Display life-sized anatomy chart.
5. Ask children to bring in illustrations of parents and their offspring (plant, insect, animal and human).
6. Ask the children to cut out pictures from magazines illustrating care and attention of new arrivals.
7. Use a full length mirror in the classroom to see differences in growth, etc. (male and female).
8. Have boys discuss what they like about being male or girls discuss what they like about being female. (Teachers should emphasize similarities rather than differences.)
9. To illustrate animal birth from eggs within the body provide the classroom with a pet (mouse, rabbit or hamster).
10. Discuss misconceptions regarding masturbation and menstruation.
11. Discuss the secondary sex characteristics that occur at different ages - infancy, early childhood, preadolescence, adolescence and maturity.
12. Discuss thoroughly optimal grooming and personal hygiene habits of both boys and girls.
13. Show students transparencies or charts of a boy and girl during the pre-adolescent and adolescent period of their lives. Have students discuss the observable differences. Discuss the following physical, chemical (hormonal) and personality changes that occur during puberty:

MALE - Deepening of the voice, enlargement of the testicles, sperm cell production, ejaculation, increased production of androgens, pubic hair, axillary hair, appearance of beard, surge in growth, cardiovascular and respiratory growth, increased shoulder breadth, larger chest cavity, increased muscular definition, greater agility and motor coordination, development of reaction speed and perceptual-motor skills, changes in metabolism, members of the opposite sex become increasingly attractive, many new relationships and problems develop, masturbatory experiences, heterosexual activity likely to begin.

FEMALE - Voice deepens slightly, changes in metabolism, increased production of estrogens, pubic hair, axillary hair, onset of menarche, ovulation, breast development, deposition of fat in skin, development of heterosexual feelings, masturbatory experiences not as likely as in male.

Stress the reasons for the changes and why they are necessary for maturation.

14. Discuss condition of acne and importance of skin care and good grooming.
15. Have children label parts of body in a drawing (ditto, or bulletin board drawing).
16. Tell how you help at home, discuss many different ways of helping (i.e. manners, smiling, taking turns, etc.).
17. Develop a story about family get-togethers, trips, and celebrations.
18. Discuss how children of different backgrounds do things differently.
19. Discuss relationships with brothers, sisters, mother, father in home (respecting property, privacy, etc.).
20. Tell how assuming responsibility for personal cleanliness and possessions can express consideration for others in the family and at school.
21. Ask students to talk to their father to determine what his job is, why he must have a job that will take him from his home, how this job affects him and the other members of his family. Repeat this activity with a mother to determine what her responsibilities are at home, what effect her work has on the other members of the family, what effect her working out of the home could have on the family. Have children present reports on the results of the discussions with parents.
22. Make a pictorial display of similar needs of all living things (air, light, food, rest, water, etc.). Compare these to the human needs which families meet.
23. Grow two sets of plants - give one proper care and deprive the other of good soil, water, sunlight. Frequently compare and discuss results.
24. Read a poem or a story of animal habits. Discuss how they are used for winter sleep. Make paper dolls or posters of humans having different clothing for various seasons or for various climates.
25. Observe the birth of fish in aquarium. Note the difference in size. Use pictures of other mother and baby animals or visit a farm or zoo, observe the male and female animals. Note the differences in color, size, plumage, etc. Compare similarities and differences in human mothers and their babies.
26. Show class uncooked egg and a baby chick. Develop idea that chicken once lived in the egg and was nourished by it.

27. Display pictures of mammals and their babies; observe ways in which all these animals are alike. (Through discussion help children to discover that these animals did not lay eggs.)
28. Share information about birth of pets at home.
29. Have children bring to school pictures of their own families. Observe the ways in which the children are like the father, mother, aunt, uncle, or grandparents.
30. Write and illustrate the following pages for a booklet:
 - How I am like my mother.
 - How I am like my father.
 - How I am different from my mother.
 - How I am different from my father.Or select any relative or adult.
31. Show children packets of various vegetable or flower seeds. Plant the seeds. Observe that the seeds produce the kinds of plants from which they came.
32. Plant cuttings from geranium or ivy plants. Discover that the new plants are the same as the one from which the cuttings are made.
33. Use fertilized eggs and observe incubation and early growth of chicken. Use plastic models of growth of chicken.
34. Use day-old chicks or small animals and discuss the necessity of feeding and cleaning up body wastes.
35. Discuss the parental care of babies in their own homes.
36. Dramatize the mother and father taking care of a new-born child in the home.
37. Have children collect pictures showing the different kinds of homes used by animal and bird life.
38. Chart the developmental stages of different kinds of animal life (when did they first walk, feed themselves, leave their homes).
39. Visit a pet shop to observe how the owner handles animals. Invite a member of the SPCA to demonstrate care of pets.
40. Read stories about family life in other lands.
41. Utilize exchange students (if available) to discuss family life in his/her country.
42. Make a bulletin board display of people of other countries, emphasizing differences in clothes, customs, etc.
43. Bring cultural objects of various nationalities for display. Have children compare our culture with others studied.
44. Taste foods and play games appropriate to other countries. Discuss the advantages of living in our country.

45. Children ask grandparents to tell about childhood experiences related to family.
46. Discuss neighborhood activities, cooperative projects of neighbors, PTA, Scouts, etc.
47. Initiate creative activities in class to develop desirable variety in the family interests.
48. Plan a booklet that will use pictures from baby days to present age showing progress.
49. Show the film My Turtle Died Today or read the book and discuss with the class.
50. Show and discuss the film The Day Grandpa Died.
51. Have the class draw pictures depicting the various members of the family at work.
52. Have children discuss adults other than parents who take care of children - day nursery, etc.
53. Help the children to compile a list of things at home which belong exclusively to them and another list of things which belong to everyone in the family.
54. Encourage the pupils to act out scenes to show ways in which the family members share with one another.
55. Ask the children to tell how they help to take care of the family property.
56. Plan with the children picnics, birthday and holiday celebrations. Suggest that they carry out plans at home.
57. Make a chart on which you show how much student time is spent with school family; compare with home family (do not include sleep time).
58. Show pictures of happy families. Have children list things that make a happy family.
59. Learn games that whole families can play together.
60. Prepare a skit to show how parents help us.
61. Make a surprise gift for the parents or the home.
62. List with the children the home duties that young children may be able to assist with or assume. Evaluate.
63. Discuss what happens when duties are not carried out in the home.

RESOURCES

Books:

A Baby is Born: The Story of How Life Begins, by Milton S. Levine, M.D. and Jean H. Siligmann. New York, Golden Press, 1949. Written for the child 6 to 10 years of age, this is a book for parents to read with their youngsters. The story of how life begins is told objectively and directly and emphasizes the love relationship of the family unit. PR-0204

About Eggs and Creatures That Hatch From Them, by Melvin John Uhl; Melmont Publishers, Inc., Chicago, Illinois, 1966, 591

U

Aesop's Fables, a Keith Jennison book; Franklin Watts, Inc. Publishers, 575 Lexington Avenue, New York, New York 10022

Alexander and the Terrible, Horrible, No Good, Very Bad Day, by Judith Voirst; Atheneum Publishers

All Alone With Daddy, by Joan Fassler; Behavioral Publishers, Inc., 1969. Ellen is a little girl who likes to be alone with her father. While her mother is away, Ellen tries to take her mother's place in her parent's world. Available through SEIMC.. FL-0167

Animals and Their Young, Glenn O. Blough; Row, Peterson and Company, Evanston, Illinois, 1949, 591

B

Before You Were a Baby; Thomas Y. Crowell Company, 201 Park Avenue South, New York, New York 10003, Ages 4-8, \$3.50

Growing Up, Growing Older; North Shore Committee on the Older Adult; Holt, Rinehart and Winston, Inc., 1964, 612

N

Happiness is a Warm Puppy, Charles M. Schulz

I Am Here, I Can Do It, My Family and I, My Friends and I, Muriel Stanek; Benefic Press, Chicago, Illinois, 1967, 301.42, (Set of books - Mental Health)

S

Let's Read and Find-out Science Book, Paul and Kay Sperry-Showers

Love is a Special Way of Feeling, Joan Walsh Anglund

Lucy's Secret Pocket, (About Stealing)

Monarch Butterfly, Marion W. Marcher; E.M. Hale and Company, Eau Claire, Wisconsin, 1954, 595.7

M

Books - (Cont.):

My Turtle Died Today, Edith G. Stull; Holt, Rinehart & Winston, 1964 E
S

The Old Man On Our Block, Agnes Snyder; Holt, Rinehart & Winston, Inc.
New York, 1964 E
S

One Day Everything Went Wrong, Elizabeth Vreckin; Follett Publishing Co.,
New York, 1966 E
V

One Little Girl, Joan Fassler; Behavioral Publishers, Inc., 1969. This
is the story of Laurie. Because she is retarded, Laurie is called
a "slow child," but she finds out she is only slow in doing some
things. The things she can do well she enjoys and takes pride in
doing. Available through SEIMC. FL-0170

See How It Grows, Marguerite Walters; Grossit and Dunlap, New York,
1954 E
W

Stories From Inside/Out, Orvis A. Harrelson; Bantam Books, Inc., School
& College Division, 666 Fifth Avenue, New York; N. Y. 10019; 1974

Stories From Inside/Out: A Discussion Guide For Parents and Teachers,
Orvis A. Harrelson; Bantam Books, Inc., School & College Division,
666 Fifth Avenue, New York, N. Y. 10019; 1974

The True Book of Animal Babies, Illa Podendorf; Children's Press, Chicago,
Illinois, 1955; 591
P

Twins, Margaret Rush Lerner; Lerner Publications Company, 241 First
Avenue North, Minneapolis, Minnesota 55401, 612.6
L

Up Above and Down Below, Irma Wibber; Scott, Foresman and Company,
New York, 581
W

What's Inside, (the story of an egg that hatched), May Garelick;
William R. Scott, Inc., New York, 598
G

Films:

Adelie Penguins of the Antarctic, BOCES #833-33, 23 minutes

Animals and Their Homes, BOCES #831-13, 11 minutes

Autumn River Camp, BOCES #833-25, 26 minutes

Big People, Little People, BOCES #831-140, 9 minutes

Birth of Puppies, BOCES #832-82, 16 minutes

Boy to Man, BOCES #832-27, 16 minutes

Films - (Cont.):

Butterfly, BOCES #831-183, 9 minutes

Care of Pets, BOCES #832-38, 13 minutes

Chicks and Chickens, BOCES #831-247, 10 minutes

The Day Grandpa Died, BOCES #831-360, 11 minutes

Families, BOCES #831-240, 10 minutes

Farm Babies and Their Mothers, BOCES #831-55, 11 minutes

Farmyard Babies, BOCES #831-56, 11 minutes

Fertilization and Birth, BOCES #831-186, 10 minutes

Girl to Woman, BOCES #832-28, 16 minutes

Granny Lives in Galway, BOCES #833-121, 26 minutes

Gray Squirrel, BOCES #831-63, 10 minutes

Growing Embryo, BOCES #832-92, 17 minutes

Happy Little Hamsters, BOCES #832-99, 13 minutes

Honeymoon, BOCES #831-371, 9 minutes

Human and Animal Beginnings, BOCES #832-75, 13 minutes

Inside/Out Series, BOCES (video cassettes), 15 minutes each:

Breakup

Brothers & Sisters

Home Sweet Home

In My Memory

I Want To

Jeff's Company

Living With Love

Love, Susan

Must I?/May I?

Someone Special

Travelin' Shoes

Little Gray Neck, BOCES #832-162, 18 minutes

Little Hiawatha, BOCES #831-284, 8 minutes

My Friend the Fish, BOCES #832-163, 18 minutes

My Mother is the Most Beautiful Woman in the World, BOCES #831-147,
9 minutes

Films - Cont.:

My Turtle Died Today, BOCES #831-148, 9 minutes

What is a Family?, BOCES #831-400, 8 minutes

Wonders of Plant Growth, BOCES #831-119, 11 minutes

You, BOCES #832-419, 17 minutes

Pamphlets:

Inside/Out, A Guide for Teachers, National Instructional Television Center, Suite 101, 1670 South Bayshore Blvd., San Mateo, CA. 94402. This guide or any parts thereof may be reproduced with consent. All inquiries should be directed to NIT, Box A, Bloomington, Indiana 47401
Available from BOCES in limited quantities. All video tapes available from BOCES on the 29 "Inside/Out" programs.

Filmstrips and Cassettes:

Growing Into Manhood, BOCES #333-90, 26 minutes

Growing Into Womanhood, BOCES #333-91, 26 minutes

Kits:

DUSO Kit I, grades K-2, BOCES #123-17

DUSO Kit II, grades 3-4, BOCES #123-18

HEN:

Family Life Education, BOCES #HN-12

CONSUMER, ENVIRONMENTAL AND PUBLIC HEALTH

OVERVIEW

The mentally handicapped are consumers. Furthermore, handicapped children watch television as much if not more than their non-handicapped peers, and are the victims of advertising claims every bit as often. It is tremendously important to make every child recognize false and misleading advertising, and distinguish between useful and effective consumer products and those that may be useless or even harmful.

Intermediate grade children must become familiar with the many natural environmental conditions that man must, to some extent, control in order to remain healthy. They should know that water must be purified before drinking, for example, and that it is unsafe for them to drink the water in streams and lakes.

However, pupils should be taught that not all of the things man does to the environment are good. Some factories make the air and water dirty. Beer and soft drink cans along the edges of highways are examples of one way people make the environment dirty and messy.

Although there are people and agencies within the community to help make it a safe place to live, each person has the responsibility of doing his best to keep water, air, parks, lawns, cities and country roads neat and clean for everyone to enjoy.

The children need to discuss together the things they can do to help --and there are quite a few! If they understand that trees have to be cut down in order to make the paper they use in school, and that makes the landscape bare and ugly, they may be more willing to write on both sides of the page, and, when coloring, to color all the way to the edges. If there is a recycling center in the community, a visit can be educational and fun.

These students should also be aware of the importance of a variety of people in the health of the public as well as their own roles in public health. Since millions of dollars are spent on useless health aids, they should also be made aware of quackery and its effects on the public.

OBJECTIVES

1. Describe the nature of advertising and promotion practices.
2. List some purposes of advertising.
3. Analyze truth in advertising.
4. Evaluate deceptive packaging techniques and higher costs.
5. Identify techniques used by advertisers that take advantage of the psychological reactions of consumer groups.
6. Develop criteria for evaluating advertising and making better use of health dollars.
7. Define the basic concepts relating to the environment.
8. Identify the elements within the natural environment and those created by man that have the potential for being harmful.
9. Illustrate the physical limitations of our natural resources.
10. Cite examples of actions that demonstrate the responsibility of the individual for preserving and enhancing the quality of his environment.
11. Analyze the role of the people in the family, school, community, nation and world that cooperate to protect the environment.
12. Describe how the contamination of the environment through abuse is a genuine threat to man's health and future existence.
13. Explain how man is dependent upon his environment.
14. Describe the factors that determine when one should make use of health services, i.e., avoid the dangers of medical neglect, self-diagnosis and self-treatment for himself and others for whom he has a responsibility.
15. Identify the factors that influence self-medication.
16. Distinguish between prescription drugs and over-the-counter drugs.
17. Distinguish between medical and non-medical health practitioners.
18. Evaluate the practice of using another person's medication.
19. Describe the characteristics of health quackery.
20. Develop criteria for making the most of one's health dollar.

21. Express an understanding of the roles, responsibilities and trainings required in health careers.
22. Cite not only the financial but the humanitarian rewards of health occupations.
23. Express an awareness of future opportunities in health careers.

MAJOR CONCEPTS

1. Accurate information on labels, in advertising and promotions, are consumer rights.
2. The quality of a product may mean spending more - a bargain is not always a saving of money.
3. Consumer health involves wise judgment and selection of health information, products and services that pertain to health.
4. There are agencies and groups that protect the health consumer.
5. Our environment, which includes the immediate surroundings, and the people in the surroundings, has an effect on us.
6. Proper sanitary disposal methods are essential to the health and well being of any community and environment.
7. We are dependent upon many people for safe water and air.
8. Without safe water and air, human life could not continue.
9. There are living and non-living hazards in our environment.
10. Each of us can improve his environment.
11. Many health agencies and organizations serve, protect and inform the consumer.
12. Laws and regulations protect our health and health of others.
13. Professionally trained health specialists safeguard our health.
14. Harm can result from self-diagnosis, self-medication, and the unwise use of drugs, medicines, devices, cosmetics, and dietary supplements.
15. Unlimited opportunities are available in many fields under the broad spectrum of health careers for those students who are interested in richly rewarding occupations.
16. Health career opportunities can lead to great satisfactions that one receives from helping others.

CONTENT OUTLINE

I. The Individual as a Health Consumer

- A. What is a health consumer?
- B. Who are health consumers?
- C. How are health consumers important?
 - 1. Influence on the kinds of health services and products made available
 - 2. Prices of items are affected by consumer actions
 - 3. Influence on the quality of health services and products
- D. What special problems do health consumers face?
 - 1. Deciding when to seek health services
 - 2. What health problems can be treated without visiting a doctor
 - a. Self-medication
 - b. The hazards of treating oneself for illnesses
 - 3. The Scientific Revolution
- E. How to be an intelligent health consumer
 - 1. Purchasing and using drugs and medicines
 - a. Prescription medicines
 - b. Non-prescription medicines
 - 1. Labeling
 - 2. Limitations of use
 - 3. Other pertinent information
 - 2. Choosing medical and dental care
 - a. Types of medical doctors
 - b. Health-related specialists
 - c. Dentists
 - d. Other nonmedical health personnel
 - e. A look at how the health consumer can select his health advisor
 - 1. Sources of information
 - 2. Criteria for selection
 - 3. Making the most of the health dollar
 - a. Knowing what is needed before buying
 - b. Comparing values and checking the quality of products and services
 - c. Following the advice of your physician
 - d. Buying health products in sensible quantities

II. Health Advertising and Promotion

- A. Definitions of important terminology
 - 1. Advertising
 - 2. Promotion
- B. Purposes of advertising
 - 1. Stimulating buying
 - 2. Educating the consumer
- C. The responsibilities of advertisers to consumers
 - 1. Advertising and truthful claims
 - 2. Advertising messages in good taste
 - 3. Advertisements and respect for the privacy of the individual
 - 4. Advertising on labels and its accuracy

III. Undesirable Promotional and Advertising Techniques

A. General criticisms of health advertising

1. Claims are distorted beyond that which is approved in the products final printed labeling
2. Deceptive research claims
3. Encourage unnecessary purchases
4. Stimulate emotional rather than rational buying
5. Advertising increases the cost of health products
6. Advertising language is often confusing and meaningless
7. Health product ads often contain more half-truths than truths
8. Other criticisms

B. Deceptive health advertising

1. Testimonials
2. Guarantees
3. Incomplete labeling
4. Deceptive packaging
5. Exploitation of special groups
 - a. Children
 - b. Teenagers
 - c. Older population
6. Other deceptive techniques
 - a. Fictitious bargain
 - b. The "favored few"
 - c. Bait advertising

LEARNING AND EVALUATIVE ACTIVITIES

1. Select and discuss some of the pamphlets and publications related to consumer health with your parents.
2. Write in class a definition of what is meant by consumer health and health information, products and services.
3. Discuss the statement, "Everyone is a health consumer."
4. Interview or invite to class a representative of the Better Business Bureau to explain the gullibility of the American public and how the consumer is being protected.
5. Have the class list some of the products that affect health; classify them as beneficial or harmful substances.
6. Compare contents of the same product obtained at high and low prices and quality of items purchased in a discount store. Possibly the book The Medicine Show will help.
7. Develop a criteria for selecting and purchasing personal health products by reviewing costs, claims, who recommends, selling motives, etc.
8. Make posters, bulletin board displays heightening the emotional appeals of advertised health products.
9. Display pictures of gadgets and devices or the real objects sold by quacks. These might be obtained from the Food and Drug Administration or other groups.
10. Arrange a trip to a water treatment plant or to a conservation area. Class discussion on the variety of responsibilities in these areas. Discussion of federal, state and local laws concerning these areas.
11. Discuss how water becomes unfit to drink.
12. Write individual or group letters for information on rodent control, insect control, garbage disposal, etc. in your area.
13. Compare food waste in this country with that in other countries.
14. Diagram and discuss the water cycle.
15. Have representatives of the American Red Cross and Civil Defense explain their role in such events as floods, tornadoes, fire, nuclear warfare, etc.
16. Collect pictures of ponds, lakes, rivers, and reservoirs and ask the class, "Would you drink from or swim in these places? Why?"

17. Discuss the work being done to prevent pollution in recreational and camping areas; have the students construct posters showing how they could help to maintain these areas.
18. Have representatives from local industries explain to class how they cooperate to keep air and/or water clean. Have class visit industry.
19. Investigate the nature of air pollution and the role of the health department in this problem.
20. Ask a sanitarian to discuss health and sanitation laws with your class.
21. Invite local public health official to discuss the laws in your area which govern waste disposal.
22. Pupils write reports on the methods of sewage disposal in the community and the problems related to these procedures.
23. Discuss proper methods of waste disposal from homes.
24. Visit hospitals, restaurants, etc. to observe these laws being enforced.
25. Ask students to be aware of unsanitary practices or of heavily littered areas observed in the community. Have them determine if a law is being broken and if there is an agency to correct the problem.
26. Discuss household and field pests (rats, mice, roaches, flies, other rodents).
27. Arrange a trip to sewage disposal plant. Discussion on local efforts to protect water (proximity of sewer lines to fresh water lines), water purification methods, recycling techniques.
28. Have children identify other medical specialists and tell what each does. (Examples: pediatrician, dermatologist, ophthalmologist, obstetrician.) Have children discuss their relationship with the pediatrician and the dentist.
29. Invite the school nurse or physician to discuss what health services are needed by a family and how these may be secured.
30. Invite a physician to discuss his training, ethical standards, daily work, writing a prescription, and local requirements for a license to practice medicine.
31. Have students ask parents to help them check filters in air conditioners, humidifiers, stove hoods, furnaces, etc.
32. Is there a career for you? Develop a bulletin board of health-related occupations.

RESOURCES

Books:

A Tree is a Plant, Clyde Robert Bulla; Thomas Y. Crowell Company,
1963, 582

B

About Jerry, Jimmy and the Pharmacist, Frances B. Thompson; Melmont
Publishers, Inc., Chicago, Illinois, 1964, 615

T

Big City Workers, C. Urell and E. Vraken; Follett Publishing Co.,
Chicago, Illinois, 331.7

U

Dentist's Tools, Carolyn Lapp; Medical Books for Children; Lerner
Publications, Inc., 241 First Avenue North, Minneapolis,
Minnesota 55401, 1961, 617.6

L

Doctor's Tools, Marguerite Rush Lerner, M.D.; Medical Books for
Children; Lerner Publications, Inc., 241 First Avenue North,
Minneapolis, Minnesota 55401, 1959, 610

L

Films:

Air Pollution, A First Film, BOCES #831-252, 8 minutes

The Animals Are Crying, BOCES #832-282, 15 minutes

Baby Rabbit, BOCES #831-309, 11 minutes

Communities Keep Clean, BOCES #831-204, 11 minutes

The End of One, BOCES #831-220, 7 minutes

Everglades (National Park), BOCES #831-361, 7 minutes

Forest Fisherman, Story of an Otter, BOCES #832-238, 16 minutes

Growing, Growing, BOCES #831-276, 11 minutes

How About It?, BOCES (video cassette), 7 minutes

Inside/Out Series: BOCES (video cassettes), 15 minutes each

Buy and Buy
Just One Place
You Belong

Films (Cont.):

The Lorax, BOCES #833-87, 24 minutes

Must We Have Noise?, BOCES (video cassette) 11 minutes

Our Wilderness, BOCES #831-274, 10 minutes

Preserving Our American Wilderness, BOCES #831-275, 10 minutes

Uncle Smiley Follows the Seasons, BOCES #832-177, 13 minutes

Uncle Smiley Goes to the Beach, BOCES #832-172, 13 minutes

Uncle Smiley Goes Camping, BOCES #832-173, 16 minutes

Uncle Smiley Goes Planting, BOCES #832-174, 15 minutes

Uncle Smiley Goes Recycling, BOCES #832-175, 13 minutes

Uncle Smiley Goes Up the River, BOCES #832-178, 12 minutes

Uncle Smiley and The Junk Yard Playground, BOCES #832-176, 13 minutes

What Our Town Does for Us, BOCES #831-24, 11 minutes

Where Should a Squirrel Live?, BOCES #831-273, 11 minutes

Wonders in a Country Stream, BOCES #831-117, 11 minutes

Wonders in Your Own Backyard, BOCES #831-118, 11 minutes

Woods and Things, BOCES #831-277, 11 minutes

Filmstrips and Cassettes:

Wildlife Ecology, BOCES #392-6

Witchcraft to Modern Medicine, BOCES #392-7

Filmstrip and Record:

Algernon, the Ambulance, International Education and Training, Inc.,
1176 New Highway, Farmingdale, N. Y. 11735

HENS:

Consumer Education Materials, BOCES #HN-6

Environmental Health, BOCES #HN-11

SAFETY AND FIRST AID

OVERVIEW.

Safety education should originate within the home and be continued in the school. Experiences come through daily living and through class instruction in safety. Safety education must be given its rightful place in all classes, not in just one. The resources of many non-school agencies can be used to enrich the overall program. The Fire Department, the Traffic Division of the Police Department, insurance companies and industrial safety engineers can all contribute to the basic school safety program. We must make life as safe as possible, and provide a planned program of safety education. An annual safety week program is not enough as habits, skills and desirable attitudes develop slowly.

All programs for handicapped children are most valuable when they provide for direct involvement. Children who have seen animals up close and perhaps touched them; children who have visited a bakery, a post office and an automobile assembly plant, children who have made pottery or baked cakes or climbed the Statue of Liberty have a much better idea of what is involved in each than the child who has simply read or heard about them. Yet each has an element of danger which must be taken into consideration by the children if accidents are to be avoided.

What should the children be prepared to do if accidents occur? For a child who does not know what to do, to attempt to help someone who is hurt may result in further injury to the victim. Children should concentrate on learning how and when to help themselves when they are young. They should learn to recognize when to get help for someone else or when they are seriously enough hurt to request help for themselves. They should know their own phone number, and where to find that of the fire department and the police station. The main emphasis with young children, however, should be preventive.

OBJECTIVES

1. Identify unsafe situations and learn to avoid them.
2. Identify common safety hazards in one's home, school and community.
3. Practice behavioral traits which will enhance the safety of oneself and others.
4. Define the specific roles of the people directly related to the promotion of safety in the school and community.
5. Identify areas of risk to individual and group safety that might occur during a particular season of the year.

6. Identify areas of risk to individual and group safety that might occur during a particular season of the year.
7. Describe the major responsibilities of being a pedestrian, a bicyclist, and a bus passenger.
8. Demonstrate courtesy with peers.
9. Define a selected number of school safety rules.
10. Contribute toward the development of a safe school environment.
11. Identify the hazards that relate to various daily activities.
12. Illustrate relationships between human behavior and accidents.
13. Relate precautions taken to the reduction of hazards and accidents.
14. List the emergencies which may occur during the course of daily living that would require first aid.
15. Demonstrate the effective use of first aid supplies.
16. Use first aid techniques to combat different emergency situations.
17. Practice mouth-to-mouth resuscitation.
18. Formulate the concept that natural and man-made environmental factors influence health and safety and that some environmental conditions can be modified and controlled.
19. Distinguish between safe and potentially hazardous activities.

MAJOR CONCEPTS

1. Increased freedom in play activities requires safety practices.
2. A knowledge of the cause and kind of accidents can help individuals plan for more responsible action.
3. School accident prevention depends on every individual.
4. Many home accidents can be eliminated by the action of individual family members.
5. The individual must assume responsibility for the safety of himself and others.
6. Fire prevention is part of civic and individual responsibility.
7. Knowledge and practice of safety rules in recreational activities helps prevent accidents.
8. Appropriate responses to hazardous and emergency situations should be studied and practiced.
9. Play activities are fun, but must be controlled.
10. There are harmful substances in certain plants, animals and products of which we should become aware and should avoid.

CONTENT OUTLINE

- I. Traffic Safety
 - A. Traffic signs
 - B. Identifying accident causes
 - C. Pedestrian accidents
 - D. Safety patrol
 - E. Bicycle
 - F. Seat belts
- II. Safety in and Around the Water
 - A. Swimming can be fun
 - B. Boating and safety regulations
- III. Safety with Fire
 - A. Matches and their proper use and storage
 - B. Some common liquids that can burn
 - C. Community efforts in fire protection
 - D. Man-made causes of fires
 - E. Proper procedures to follow in case of fire
 - 1. The fire drill at school and at home
 - 2. Plans for each specific area of the school and home
- IV. Home Safety
 - A. Falls and their prevention
 - B. Burns and scalds and how to avoid them
 - C. Poisoning (gas)
 - D. Poisoning (solid and liquid)
 - E. Electrical problems and emergencies
 - 1. Safety devices
 - 2. Signs of trouble
 - F. Other miscellaneous home hazards
- V. School Safety
 - A. Classroom environment
 - B. Corridors and stairs need to be kept safe
 - C. School grounds and play equipment safety precautions
 - D. Laboratory and safety rules
 - E. Auditorium and rules of conduct
 - F. Gymnasium safety
 - G. Lavatory behavior
- VI. School Bus Safety
 - A. Safety while waiting for the bus
 - B. Safe actions while boarding and riding
 - C. Safe behavior when and after leaving the school bus
 - D. Emergency bus drills
- VII. Safety on the Holidays
 - A. Halloween
 - 1. Costumes
 - 2. Trick or treat

- B. Christmas
 - 1. Making your tree a safe one
 - 2. Decorations - pretty, but safe
- C. Easter
- D. Independence Day

VIII. Outdoor Safety

- A. Winter sports activities
 - 1. Safe ice skating
 - 2. Safety on the ski slopes
 - 3. Sledding and tobogganing
- B. Summer sports
 - 1. Baseball
 - 2. Kite flying
 - 3. Camping and hiking
 - 4. Nature's hazards
 - a. Snakes
 - b. Poisonous plants
 - c. Thunder and lightning storms

IX. Basic First Aid

- A. Basic principles
 - 1. Sending for help
 - 2. Providing for comfort and safety of victim within limits
- B. Control of bleeding
 - 1. Types of bleeding
 - a. Nosebleed
 - b. Cuts and abrasions
 - c. Puncture wounds
 - 2. Methods of control
 - a. Direct pressure
 - b. Application of cold packs
- C. Burns
 - 1. Heat induced
 - a. Cold water
 - b. Degrees of burns
 - 2. Chemical burns.
 - a. Wash immediately
 - b. Acids and bases
 - c. See doctor as soon as possible
- D. Exposure to cold
 - 1. Movement to restore circulation
 - 2. Gradual warming
- E. Poison
 - 1. Get help immediately
 - a. Poison control center
 - b. Physician or hospital
 - 2. Leave poison sources for medical person's observation
- F. Insect bites and stings
 - 1. Wash
 - 2. Disinfect
 - 3. Seek medical help if necessary
- G. Animal bites
 - 1. Wash and disinfect
 - 2. Get professional help

H. Know how to contact help

1. Doctor
2. Police, fire or emergency squad
3. Poison Control Center (if near one)

LEARNING AND EVALUATIVE ACTIVITIES

1. Bring in newspaper accounts of accidents and have discussion period to try and determine causes and prevention.
2. Have a member of local police department explain rules and regulations concerning equipment and operation of bicycle.
3. Have bicycle inspection at school to determine if properly equipped, licensed and registered.
4. Have a bicycle safety court.
5. Discuss practices which will avoid accidents due to these hazards. Make up appropriate slogans and posters for display.
6. Organize a "clean-up the playground" period to remove hazardous objects.
7. Collect and discuss news articles on home accidents and ways in which these accidents might have been prevented.
8. Make a card for home use listing telephone number of fire and police departments, ambulance, family doctor, nearest relative, and poison control center.
9. Collect data on the causes of fires in homes, public buildings and forests.
10. Invite an electrician from the power company to discuss electrical hazards with the class.
11. Correspond with insurance companies to determine the number of home falls and how this rates with other accidents involving relatives and close friends.
12. Discuss the following in relation to camping; fire hazards, drinking water, axe and knife safety, hiking, poisonous plants, wild animals, getting lost in woods, keeping and leaving a clean campsite.
13. Investigate where swimming lessons are being given in the community, and discuss swimming safety including the following:
 - The need for knowing how to swim well.
 - Having supervision whenever young people are swimming.
 - Safety procedures for diving, using inflated devices, swimming in ocean or surf.
 - Demonstrate various non-swimmer rescue techniques.
 - Describe buddy system.
 - Staying in water too long and swimming after eating.
 - Getting a suntan and going barefoot.
14. Show how changes in our way of living bring about new hazards and how old hazards disappear (curling irons, drying hair in oven, being kicked by horse, using ice picks, kerosene lamps, etc.).

15. Discuss the hazards associated with large crowds.
16. Have bicycle check to see that bikes are properly identified and parked.
17. Develop a simple checklist and conduct survey for hazards in buildings, on grounds, student conduct, etc.
18. Prepare original plays involving safety rules and precautions.
19. Prepare an exhibit of hazardous objects or materials found in homes such as metal toys with sharp edges, rugs without rubber backing, oily rags improperly stored, and easily accessible poisonous substances.
20. Participate in fire drills. Discuss ways to improve fire drills. Notice location of fire safety equipment in building.
21. Display of recreational equipment such as canoe, gun, skates, sled, skis, bat, fish hook, etc.; select one item and write good safety practices for using that item.
22. Make posters of swimming rules.
23. Put up bulletin board display illustrating safe swimming practices.
24. Write a report on local swimming areas.
25. Demonstrate what to do and what not to do when someone else is in trouble in the water.
26. Make a list or gather examples of as many types of fire extinguishers as you can. Find out the types of fire for which each one is most effective.
27. Discover means of personal protection in case of fire.
28. Gather news clippings about recent fires. Try to determine how they could have been avoided.
29. Prepare a display of fire fighting equipment.
30. Research and report on the history of fire fighting.
31. Investigate modern-day methods of controlling fires.
32. Conduct experiments on the physical and chemical principles of fire.
33. Make a list of important telephone numbers for use in emergency.
34. Plan a first aid kit for home, automobile, camping, or hiking.
35. Invite a nurse or physician to speak to class about importance of first aid and basic procedures.
36. Plan a demonstration of the proper method of artificial respiration.
37. Have a first aid quiz contest.

38. Have a demonstration of techniques by boy scouts and girl scouts who are qualified in first aid.
39. Discuss and practice safety procedures for your school, for natural phenomena which might occur in your immediate area.
40. Discuss the increased likelihood of accidents due to inclement weather.
41. For more mature intermediate level EMR pupils who are capable, obtain a resusci-doll from Civil Defense or BOCES and demonstrate its use, having the children practice in groups of two. Use instructions that are included. While children are practicing, check the respiration rate - 16 - 18 is about right. Let everybody have a chance to practice. Select a child that does quite well practicing mouth-to-mouth resuscitation. Have him demonstrate on a resusci-doll for a 30 minute period without resting. The need for steady rate that is not too fast will be obvious. Have class discussion to find out what it was like. For instance, did the child selected get tired?
42. Make up safety riddles "Carry me with my point down."
43. Discuss taking turns.
44. Dramatize what to do if a ball rolls into a street.
45. Draw and discuss pictures of places or things to avoid during play (railroad tracks, bridges, refrigerators, plastic bags, caves.)
46. Make map of neighborhood showing safe places for play and recreation.
47. Demonstrate making a fire extinguisher by putting vinegar in a bottle, adding a small amount of baking soda, which has been wrapped in tissue - put in a stopper (rubber) with a pipette in bottle, turn upside down, and aim mixture into a pail or sink.
48. Discuss the safe use of candles at celebrations. (Include sparklers, blasting caps; etc.) Discuss holiday safety tips at appropriate times of the year. Have children develop bulletin board display illustrating these points.
49. Demonstrate that a rubber-backed rug will not slip as easily as one that is not rubber-backed.
50. Discuss what could be results of skates, pencils, marbles left on stairs or floors.
51. Have children make a collection of magazine pictures to be used in a chart depicting household products which may be dangerous; assemble pictures by rooms in a house (bathroom, laundry, etc.).
52. Make a display of plants to avoid (pictures or illustrations). Survey local neighborhood to see how many grow in your area; discuss eating strange berries.

52. (Cont.)

Some common poisonous plants include:

Bulbs of: hyacinth
narcissus
daffodils
autumn crocus
Star-of-Bethlehem

Leaves of: poinsettas
lilies of the valley
rhubarb
oleander
bleeding heart

Berries of: mistletoe
daphne
Yews
Jessamine

All parts of: laurels
elderberry
buttercups
rhododendrum
azaleas
Jack-in-the pulpit

53. Discuss poison symbol. Construct cabinet made of heavy paper, place in it drawings of all things that may be poison. Discuss taking medicine.
54. Discuss danger of turning on lights, or touching electrical appliances when hands and or feet are wet.
55. Demonstrate static electricity (walking on wool carpet, combing hair, stroking cats' fur, etc.)
56. Discuss what to do if an accident happens at school or home when there is no adult immediately available.
57. Discuss reasons for laws and regulations regarding safety and the need to follow them.
58. Have children make a "Be Careful" scrapbook with pictures of hazardous situations or places. Also use pictures of people doing dangerous things or using dangerous objects.
59. Discuss safety problems encountered while going to and from school. Include meaning of safety signs - danger, stop, slow, school, railroad, etc.
60. Discuss why pupils should not talk to strangers or accept anything from them.
61. Have children make posters showing dangers of jaywalking. Evaluate.
62. Have a member of a snowmobile club visit class to discuss safety pointers.

63. Darken room and have pupils dressed in various colored clothing walk in front of room. Be sure to have one pupil wear white. Discuss which colors are more easily seen and the correct way to walk along streets or highways that do not have sidewalks.
64. Discuss how behavior should be adjusted to meet unexpected weather hazards.
65. Make puppets and plan a puppet show on "safety".

RESOURCES

Books:

Bicycle Blue Book, The Goodyear Tire and Rubber Company, Akron, Ohio 44316

Bicycle Safety Packet, Bicycle Institute of America, 122 East 42nd Street,
New York, N. Y. 10017

Bicycle Songs of Safety, Jill and Lawrence Grossman; Holt, Rinehart, and

Health and Growth - Healthful Living Program, Scott, Foresman & Company,
Glenview, Illinois 60025

Instructor Safety Poster, Instructor, April, 1973

Safe Living, A K-6 Scope and Sequence Booklet, Board of Cooperative
Educational Services, 125 Jericho Turnpike, Jericho, N. Y. 11753

Safety Action; Traffic and Pedestrian Safety. A Guide for Teachers in
the Elementary Schools, ERIC, Ed 051 164. Delaware State Depart-
ment of Public Instruction, Dover; Department of Transportation,
Washington, D.C.; EDRS Price MF-\$0.65, HC-\$3.29

Films:

In Case of Fire: BOCES #842-24, 20 minutes

Meeting Strangers: Red Light, Green Light, BOCES #832-98, 20 minutes

One Got Fat, BOCES #832-200, 15 min.

Safe in the Water, BOCES #832-332, 15 minutes

Safest Way, BOCES #842-52, 20 minutes

Safety Adventures Out of Doors, BOCES #831-174, 11 minutes

Safety as We Play, BOCES (video cassette), 7 minutes

School Bus Safety With Strings Attached, BOCES #843-25, 28 minutes

Survival Kit Part I, BOCES #831-329, 10 minutes

Survival Kit Part II, BOCES #831-330, 10 minutes

Kits:

Practoplasts, BOCES #123-21

Resusci-Anne, BOCES #123-20

123